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ABSTRACT

Primarily intended to raise issues for discussion among child caregivers, this series of 26 brief reports focuses on some of the basic aspects of providing care for young children in centers, small group homes, or family day care homes. A few of the sheets are written chiefly for directors and people working in advisory, consultative, or teaching capacities. Parents using child care may also find information about issues of concern to people caring for their children. Titles in the series include, among others: "What is a Caregiver?" "The Director's Challenge," "Relating to Parents Daily," "Arrivals and Departures," and "Overview of Routines." Several additional sheets discuss discipline and aggression among young children of various ages. For some topics, reference is made to other readily available resource materials. When appropriate, readers are also directed to other sheets in the series which are especially relevant to the topic. (RH)

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Introduction and Overview

Day care is about people growing — not just children, but staff and parents as well. Staff must grow in maturity, skills, and confidence if day care is to be good. Parents who use day care should grow in their understanding and appreciation of their child and in relationships of trust and caring with their child's caregivers. Of course children in good day care are growing in skills, confidence; creativity, caring for others, and many other ways.

Day care is about people caring, not just adults caring for children, but staff caring for other staff, and staff and parents caring about each other. Good day care is also about the community caring for families and caring for carers of children. Carers and people working in other capacities in child care can continue doing a good job only if the society in which they work values child care of high quality and provides appropriate supports, resources, and rewards to people caring for young children.

Day care is a field of work incorporating much diversity — large centres, neighborhood houses, family day care, family groups, occasional care. In spite of that, day care as a field of work has an identity all its own distinct from kindergarten teaching, nursing, social work and other related professions. In our work with child care personnel at all levels, we have found that one of the needs is for written material on specific aspects of caring for children in a day care setting.

The notes in this series are just that — notes. They do not treat topics in detail or give solutions, but rather are intended to raise issues for discussion. They are brief deliberately, but hopefully will encourage people to read and talk further. Some points made are undoubtedly controversial and users of the material will disagree about some issues. This is good, for it raises questions and issues to consciousness and that may lead to rethinking and change.

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Topics include some of the main aspects of providing care for young children. The sheets have been written mostly for caregivers of children in centres, small group homes, or family day care homes. Some topics apply primarily to care in one of the settings, some apply equally to all settings. A few of the sheets are written chiefly for directors and people working in advisory, consultative or teaching capacities. Parents using child care will find some of the material to be useful, as it will give them insight into the issues that are of concern to people caring for their children.

With some topics, reference is made to other resource material. We have only included selected materials readily available in ordinary book shops or through the Lady Gowrie Child Centres and the Australian Early Childhood Association Inc. (formerly the Australian Pre-School Association). Readers are also directed at the end of some sheets to other sheets in this series which are especially relevant to the topic. There is some deliberate repetition of information in different sheets. Each sheet has been written to stand on its own. However, with certain topics (discipline, routines, parents, for example), several sheets are related closely, and users are encouraged to obtain all of the sheets that relate to those topics. We hope that this does not detract from their usefulness, but rather adds to it.

People working in child care will also find useful a series of "Teaching Notes" produced by staff at the Lady Gowrie Child Centre, Melbourne. It goes without saying that caregivers teach and teachers give care. The two sets of resource materials, though similar in format, have been separated as the range of issues in caring for babies, toddlers, and three to five year olds for up to ten or more hours a day in child care is somewhat different from work with three to five year olds, which is the main focus of the "Teaching Notes". People working in any capacity with young children should look at the titles in both series and decide which sheets will meet their needs.

The series will probably never be completed — that is, we will probably not reach a time when we feel that we have covered all relevant topics. We welcome suggestions from users about future sheets and reactions to current ones.

We hope that you will find these materials useful.

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Good Child Care for Babies and Toddlers

Anne Willis Stonehouse

Interest in and concern for the quality of care for under three year olds has grown recently. Only a few years ago the attitude among some people seemed to be that it was important to feed babies and toddlers and keep them clean – in other words, to provide good physical care – and eventually they would walk, talk, become people, at which time it would be important to provide appropriate play and learning experiences. Occasionally one still sees great differences in the quality of care for under threes and older children within a centre. That is, for three to five year olds there are trained staff, impressive equipment and play materials, appropriate activities, while the room for babies and toddlers is small and almost filled with cots, which allow little play space. Play materials consist of laundry baskets full of pieces of toys, or a few toys on high shelves inaccessible to children. The staff may have little training to enable them to meet the particular developmental needs of babies and toddlers.

Fortunately, more people now appreciate the importance of early experience, not only because of its impact on future development, but because of increased appreciation of the meaning to children of experiences as they have them. The importance of early experience is expressed aptly in the following statement: "Some of the world's greatest scientists, explorers and discoverers wear nappies!" It follows then that they need laboratories, tools and rich territories to explore.

What Are Children Learning In The First Years Of Life?

1. *An incredible number of skills with body and hands.* Learning to control the body, particularly the hands, is one of the most challenging developmental tasks of the first few years, and one of the most exciting for the child.
2. *How the world works.* In their play under threes are figuring out laws of gravity, weight, motion and mass through endless self-directed experiments.
3. *Communication skills.* Young children are learning how to give information, ask questions, convey needs, wants and feelings through language as well as non-verbal means.
4. *A general attitude or outlook toward other people.* Experiences in the first years should help children learn that adults can be trusted, that they care, that they will try to help when help is needed, that they are fun to be with.
5. *A self concept.* By the age of two a child has a fairly strong picture of self either as a competent, cared-for person who brings joy to others, or, on the other hand, as someone who causes trouble, who is naughty, who arouses more anger and frustration than pleasure. Self concept has a major impact on development; it is critical that children develop a positive picture of themselves.

What follows is a tour through words of a good child care program for babies and toddlers, a place where the kinds of learning described above are being nourished. It should be obvious in the tour that a good child care experience is, in many ways, like a good home experience. This implies that quality centre care and quality family day care are also very similar. Each form of care has particular strengths, and both should be available as options in communities for families to choose. After some background information, the tour will focus on three aspects of the program: space and equipment, behaviour of caregivers and children, and daily program.

BACKGROUND INFORMATION

There is currently a great deal of interest in family style or mixed-age grouping in child care. Of course family day care almost always includes children of different ages. In centres there are advantages and disadvantages in single-age and mixed-age groups, and centre staff will have to consider such factors as amount and arrangement of space, numbers of children at each age, staffing ratio and pattern in deciding how to set up the program. In general, the wider the age range in a group, the smaller the group should be and the more space and equipment required. Certainly, caring for children of different ages requires a great deal of skill, creativity and hard work from the caregivers.

Probably, a modified family grouping is best – that is, a very small group of no more than six to eight children of different ages who are sometimes together, sometimes with children their own age. After all, that is what a good home experience offers. Family style does *not* mean mixing in two or three babies and toddlers with fifteen or twenty three to five year olds for a major part of the day. Under threes need only a few people to relate to. Older children are much more capable of relating to a larger number of adults.

Under threes in child care need a special place, a home base and a few familiar people to come to and be with each day. This need for security, predictability and sameness in people, place and program, that allows very young children to begin to make sense of the

world, must be kept in mind in planning programs.

Whether grouping is same-age or multiple-age, groups with under threes should be small. Even with a high ratio of staff to children, it is impossible to give quality care if the group is large. As a general guideline, groups with under threes should not exceed eight to ten children. The reasons again are security and sameness, offering the chance for adults and children to know each other well.

In quality care there must be *enough* caregivers, preferably one adult with every four children. Emphasis is placed on the word *with*, as it is no good having an adequate ratio if caregivers have responsibilities that take them away from the children much of the time.

Consistency of caregivers is especially important for babies and toddlers. There should be a minimum number of caregivers totally, so that children and caregivers can know each other. Staffing infant and toddler rooms with numbers of volunteers to improve the ratio or rotating staff is not appropriate. How can a baby or toddler learn to trust someone unknown and unfamiliar? It may be helpful for caregivers to assign themselves special responsibility for "figuring out" or being the expert on certain children.

SPACE AND EQUIPMENT

An overall feeling of brightness, colour and cheerfulness gives the observer the impression that this is a pleasing place to spend time. The colour and cheerfulness are placed with the height of young children in mind. Some pictures, posters, and other interesting things to look at are placed at the child's eye level. (Admittedly this would be easier to do if someone invented a way of attaching pictures to the wall so that toddlers would not be able to pull them off).

There is enough space. Sufficient open space is one of the most important requirements for quality child care for under threes. There are two reasons for this. First, moving about for the sheer joy of finally being able to is a favourite activity of older babies and toddlers and a major step towards autonomy and separateness. The feeling is probably similar to the sense of freedom one has after receiving a driver's licence.

Secondly, babies and toddlers to not have the social skills and self control to be able to get along well with each other, even though they sometimes enjoy each other immensely. Therefore, unpleasant interactions between children are more likely to occur when adults mistakenly expect toddlers to cope with each other in a small space.

Groups of one to three year olds need proportionally more play space per child than any other age group. Yet usually in child care programs the three to five year olds occupy the largest amount of space. This is probably because centres are likely to have more equipment and caregivers more ideas of activities for this older group. Three to five year olds, however, are more likely than toddlers to stay in one place, and they can cope more easily with other children being close to them.

There is a variety of interesting ways to spend time, not just a collection of toys in a space. There might be bean bag chairs, cushions, a climber, a cubby house, a sofa. In other words, placed through the space are invitations to get involved, to do things.

There are area rugs or carpeting on a large part of the floor, so that the floor is inviting and comfortable for children and adults. Toddlers and babies do much of their work on the floor. There are soft, cozy, warm places with mats, pillows, or a large comfortable chair, places where children can safely retreat for a quiet time or sometime alone, both much needed by some children in care. The furniture is scaled down to size for short-legged toddlers. Tables should be only slightly above waist height when children are seated. Chair seats should be low enough to allow feet to touch the floor. Often toddlers are asked to spend time in spaces designed and equipped for older taller children.

There are interesting and appropriate play materials displayed attractively on low accessible shelves in a way that invites toddlers and even babies to use them. When play materials are displayed intact on low shelves rather than piled or thrown into boxes and laundry baskets, children tend to play with them in a more constructive way. Pieces of things – old puzzle parts, an assortment of blocks, trucks missing wheels, wheels without trucks – are begging to be dumped, scattered and thrown. Materials for dumping, scattering and "fiddling with" should be provided, but under threes need much more. They need a variety of materials appropriate to their developmental skills and interests.

CAREGIVERS' AND CHILDREN'S BEHAVIOUR

Babies in quality care are out of their cots during almost all of their awake time. Those that cannot move themselves are put in interesting places and their position is changed frequently. Caregivers know that watching people is better for babies than watching mobiles.

Caregivers are moving about the space too. In a quality program there is no time for caregivers to sit against the wall in adult-sized chairs and oversee. Rather, they are involved with children – involved at the child's level, not hovering over. Caregivers as well as children spend much time on the floor.

One hears much pleasant "talk" between caregivers and children. Babies are encouraged to communicate, and their attempts – babbles, coos, sounds, and

later words – are responded to by adults, who talk in a natural way to even very young babies.

There is a lot of holding, hugging, touching, smiling. Adults show warmth and caring in a way that can be understood by young children. Caregivers and children develop special relationships of trust and attachment. One gets the impression that caregivers enjoy their work.

Children, even young babies, have lots of chances to get their hands on things, to explore, discover and move about the space on their own if they can. Most of the time children choose where they are and what they are doing. Initiative on the children's part is valued.

Children are given choices, allowed to make decisions where this is appropriate. A four month old can choose what toy to play with, a one year old can choose between an apple and an orange for morning tea, a two year old can choose which book to look at.

Children are encouraged to do things on their own as interested, but they are not pressured or forced. Challenges, new tasks to master such as using the toilet, are presented as individual children show signs of interest and readiness, and not because an adult decides a child or a group of children *should* be ready.

Understanding of children is seen in the caregivers' interactions with them. Particular sensitivity is shown to the following characteristics of toddlers, which make it difficult for them to be in groups:

- inability to share, need to possess, to have
- lack of self control, impulsiveness, impatience
- egocentrism, difficulty in taking into account other people's needs, rights and feelings
- limitation of not being able to communicate clearly enough to be understood
- curiosity, need to explore and experiment.

One gets the feeling that caregivers understand that *being* a toddler is more difficult and challenging than *caring for one.* Caregivers approach toddlers with a spirit of helpfulness and alliance rather than confrontation. Discipline is viewed as teaching a child what pleases, what *to* do, not just what *not* to do.

DAILY PROGRAM

Throughout the day a variety of activities is going on – eating, sleeping, playing. The ideal aimed for is that there is hardly ever a time when everyone is doing the same thing. The program is built around individual needs rather than group needs.

In play, children are always given choices. Table activities are offered as one possibility among others throughout the day instead of being set up at a particular time in the day.

Group activities, such as music, stories, puppets happen spontaneously as children show interest. Children are free to enter into and leave groups as they wish. In a group of under three year olds there is no place for trying to make everyone sit in a circle to listen or everyone dance or everyone paint, for example.

Groups are small and informal, a typical one consisting of an adult sitting on a bean bag chair with a child on her lap, one beside her, all sharing a book.

There are different places for children to spend time during the day. Children are not confined all the time to one room, but they make visits to the kitchen, the laundry, the director's office, other playrooms, outdoors, nearby shops whenever it can be done safely.

Older babies have things to gather and carry around, places to crawl into and over, books to look at, water and sand, paint and crayons, manipulative games, materials for domestic imitative play (such as teddies and tea sets), dough, things to push, chances to climb and run. The list is endless.

The daily schedule is built around children's needs, not adults' convenience or need to control. Unfortunately, one encounters occasionally someone working with children who has too great a need to control and manage other people. These people should find some other kind of work, as they try to enforce unnecessary and unsuitable structure on this age group.

Time spent waiting is wasted time for young children, and quality programs involve a minimum of waiting. There is no place in a child care program for any age group for "assembly line toileting" or sitting at tables with nothing to do for ten minutes waiting for lunch to be brought in.

Children are not rushed. Routines are seen as an integral part of the program – as a time for play and learning rather than a time away from play and learning. With under threes, meal times are one of the richest times of the day, full of opportunities to practise skills, gain mastery and feelings of competence, interact with adults and other children. In fact, probably one of the best ways to get a quick indication of the quality of a program for children is to look at what happens at meal times and rest time.

Allowing time to treat arrivals of children and parents with sensitivity is of critical importance. Caregivers help parents and children manage separation from each other, and they understand that parents may have problems separating even when children do not. Special consideration is given to plans for the end of the day, when everyone, including parents and caregivers, is tired. Caregivers

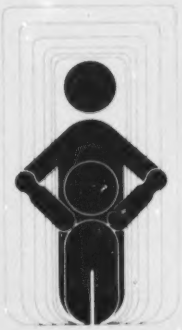
understand that no child wants to be the last to leave.

A good child care program is essentially a place where children are treated with respect, are treated as people with feelings similar to adults, where caregivers trust each other. Quality happens when caregivers enjoy their work and feel appreciated. It happens when caregivers and parents have a mutually supportive relationship with regular communication and sharing about the child. There are no indications of an attitude on the part of the caregivers that says "you bring them to us and we will do a good job of substituting for you". Caregivers do not in any way try to take the place of parents. Quality child care addresses the human needs of children, staff and parents.

Note 1: No references to particular sheets are given, as almost all of them relate in some way to good child care for under threes.

Note 2: Further information on good infant care is contained in *A Good Beginning for Babies* by Anne Willis and Henry Ricciuti (Washington: NAEYC, 1975). Sold in Australia through the Australian Early Childhood Association Inc. (formerly the Australian Pre-School Association).

These notes have been prepared for people working in day care. Other sheets in the series are available from **the Lady Gowrie Child Centre, 36 Newry Street, Carlton North, Vic., 3054.**



What is a Caregiver?

Anne Willis Stonehouse

Caring for children, whether in a child care centre, a family day care home or other setting, is a job that is difficult to explain to people who are unfamiliar with it. If you are a caregiver, perhaps you have had the experience of having someone ask you what sort of work you do. You reply, "I care for children", and the reaction is, "Oh, that must be fun". You get the distinct impression that the person pictures you frolicking in the park all day with happy, playful, cooperative children. Not quite an accurate picture of a caregiver's day!

People who care for children work hard, and face many challenges each day. Furthermore, they make a very important contribution to society. What could be more important than providing young children with the experiences they need to grow and develop, helping them to learn about themselves, other people, and the world around them? The tremendous importance of their jobs causes some people in child care to make excuses – "If only the funding were better, if we had more space, better equipment, more ideas of things to do with the children, *then* we could do a really good job". All of those things contribute in a major way to the quality of the experience for children, but not as much as the caregiver. The way caregivers relate to the children they care for is much more important in determining quality than the space, equipment and activities. They can increase the quality of good caregiving but they cannot make up for poor caregiving.

The diverse roles of a carer are summed up in the following essay.

IN PRAISE OF CARERS
(who far too often are "she's" rather than "he's")

A good worker with children is someone who:

shows no fear of spiders and other creepy crawly things and does not flinch at the sight of blood;

reacts to smashed snails with enthusiasm and interest;

smiles and talks pleasantly to a child whose very smelly nappy she is changing;

responds patiently and lovingly to a child she may not be especially fond of;

accepts sloppy kisses from little people with runny noses and hugs from Vegemite – or paint – or mud coated hands;

comes up with an appropriate confidence-building comment when shown a painting resembling a cloth used to clean shoes.

She is:

a chef and waitress in a restaurant where customers are very demanding, often careless and messy, likely to change their minds, and they never leave a tip;

a translator who can understand and speak not only Greek and Italian but also two-year-old and one-year-old English – for example, she knows that "ugh" means "I want to be picked up", that a chubby finger pointed in the direction of the window means "Did you see that beautiful bird that just flew by?"

an architect who designs and regularly rearranges multi-purpose spaces to meet children's needs;

a removalist who assembles, moves and alters equipment;

a maintenance person, custodian and cleaner, working, often under great pressure and with distractions, to remove paint, clay, water and food hundreds of times a week from walls, floor, furniture and people;

a junk collector, a professional bowerbird who sees potential in other people's rubbish;

a skilful and unashamed beggar;

a musician, even though she may not sing in the shower because she doesn't like the sound of her voice;

a dancer and athlete;

a scientist who understands how the universe works and can answer questions such as "Why does the wind blow?", "What makes fire burn?", "Where do stars go in the day time?", who not only knows the answers but can explain them in a way that satisfies a curious four year old;

a gardener and guardian of overloved animals and insects;

a judge who can make the correct decision about what is fair when she hasn't a clue as to who had the dolly first and both parties say that they did – who settles hundreds of major and minor disputes and also knows when to stay out of the picture;

a magician who can transform active toddlers into sleeping toddlers, who can divide three small biscuits into seven equal pieces.

She is someone who can wait – wait for babies to sleep, toddlers to catch up, four year olds to finish.

She is expert at waiting for tea and toilet breaks.
In short, she's a superperson!

In addition to working with children, perhaps the most challenging aspect of a carer's job is relating in a supportive, caring, cooperative way to parents of the children in care.

Carers in centres also must relate well to and work effectively with other staff members, often under conditions with many pressures and demands.

What are some of the characteristics of a good carer? You might want to make your own list first and then compare it with this one.

1. *Stamina and good health.* Caring for children is very demanding physically. When carers initially work with children, most have a few weeks of barely making it through the day, and going home exhausted.
2. *Sense of humour.* Sometimes the only way to cope is to laugh. A carer must have fun in her work; it is too hard a job to do otherwise.
3. *Flexibility.* The ability to drop or alter plans is a necessity when working with children.
4. *A creative approach, openness to new ideas.* There is nothing more deadly than a carer who has "turned off" – who is joylessly and unthinkingly going about her job the same way day after day. The best carers are those who never reach the point of feeling that they know all that they need to know, that they have made it. Rather they are people who continue to see themselves, even after years of experience, as learners.
5. *Patience.* Children take a long time to do things, to remember, to learn, to grow up.
6. *A growing feeling of confidence and trust in self and in the children cared for.* With experience and support caregivers should learn that they will be able to handle almost any situation that arises.
7. *An ability to take pleasure in small accomplishments, to get excited about everyday occurrences.* Days with young children are mostly made up of basic, small, simple happenings.
8. *Warmth, the capacity to show caring in ways that can be understood by young children.* Giving affection is a major part of caregiving.
9. *Empathy, the ability to see things from another person's point of view – a child's, a parent's, another staff member's.* The capacity to consider the opinions and perspectives of others goes hand in hand with working effectively with other people.

Caregivers should assess themselves and their work periodically, perhaps along with other people working in the centre. It might be interesting for caregivers in a centre to answer the following questions and discuss them together.

1. How would you describe your job to someone who knew nothing about it or about working with children?
2. What are the most important qualities that a caregiver should have?
3. If you were interviewing applicants for a position like yours, what are some of the questions you would ask?
4. What is the hardest part of your job, the part you like the least?
5. What about your job gives you the most pleasure?
6. What would help to make your job easier or more pleasant?
7. Are there some things you wish you knew more about to make your job more interesting?
8. What supports and resources would help you to do your job better?

OTHER RELATED SHEETS:

3. Staff Needs, Relationships and Morale
5. Attitudes to Parents
6. Relating to Parents Daily

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Staff Needs, Relationships and Morale

Anne Willis Stonehouse

To look only at the needs of children in child care is a mistake. If a program is to be good for the children, it must be good for the staff as well. In fact, an interesting exercise for carers is to take one of the many lists of children's needs and look at the extent to which they apply to the people who care for the children. One such list is contained in *Day Care 1: A Statement of Principles* (Washington, D.C. Office of Child Care, 1971). What happens if we look at them not only as children's needs, but as carers' needs as well?

1. *Compassion and caring.* Staff need praise for a job well done, support when things are not going so well, consideration when a situation outside work is worrying them. In the best centres compassion and caring are shown by staff for each other. Staff are acknowledged as being people with a life outside the centre.

   A tangible and very important sign of caring for adults in a centre is that there is a comfortable attractive place away from children where caregivers can retreat for a cup of coffee.

2. *Security.* Security involves not only knowing that a job will not be taken away suddenly, but also knowing what is expected, that there will not be drastic changes without some warning. Staff work better with the knowledge that problems and conflicts, which are inevitable, can be acknowledged and worked out.

3. *Freedom.* Each staff member should be allowed to make some decisions appropriate to her experience and skill, and to have some autonomy. Freedom to grow, to experiment, to be oneself are necessary if a caregiver is to maintain a creative approach. In quality programs individual differences in children are accepted and taken into account in program planning. They should also be accepted and nourished in caregivers. For example, there is certainly room within a centre for both active, talkative, animated, busy caregivers as well as ones with a quiet, gentle, slower paced, relaxed style of interacting with children.

4. *Chances to build self esteem.* This happens for adults, as it does for children, through being encouraged to try new things, praised for good work, listened to, treated as important and given new responsibilities as ready. Individual strengths and skills should be identified and used. Staff who are especially skilled or knowledgable in an area should have opportunities to teach other staff. Competence and skill coming from experience should be valued along with participation in formal training courses. Artificial hierarchies among staff based solely on formal training are inappropriate and demoralising.

5. *Challenges.* Caregivers need opportunities and encouragement to think about what they are doing, to improve, to question – in short, to grow and develop professionally.

Caregivers usually work long hours, often in less than optimal conditions, and they usually work very closely with other people. It is inevitable in child care, even in the best centres, that tensions and conflicts will arise. Current staff may feel threatened when new staff are hired. Staff will disagree sometimes about what is best for a particular child. It should be accepted that these differences will occur and solutions and compromises found.

It is impossible for staff who are feeling frustrated, unsupported and unhappy to provide quality care for children. Unresolved conflicts and disagreements which take up morning and afternoon tea times increase tensions and are very destructive. There must be ways of discussing problems constructively.

Caregivers in the same group of children cannot possibly provide quality care if they do not get along with each other, or if they just "peacefully co-exist". Rather, they must function as a team. Smaller group meetings or regular individual talks between a director and one staff member, in addition to general meetings, can give staff the security of knowing that problems that come up can be brought out in the open and dealt with. Having some informal means of assessing caregivers' work, if only through regular conversations, usually increases security of staff.

Staff morale is a critical determiner of the quality of care. It inevitably declines after difficult times, sometimes after times of great change or maybe even after uneventful times. A social gathering or a new piece of equipment can temporarily lift spirits and create renewed interest in work. Morale is both a contributor to and a reflection of staff attitudes towards work.

It is important to help caregivers maintain a creative open approach to the children, the space, the daily program. To do this requires giving them time to evaluate their work and to plan and assess changes. New ideas from outside the program through speakers, visits to other programs or written material will help caregivers to look with a fresh approach at their work.

Children develop new skills, experiment, try, explore only when they feel secure, when they trust the people around them. Quality care happens when caregivers base their work on this same kind of security and trust. Many resources, new stimulation, fresh approaches can come from the outside, but the real impetus for quality must come from inside the centre.

Caregivers who are functioning well usually have the following characteristics:

1. They believe in the work they are doing. They do not see child care as providing a second rate experience for young children but rather view it as a potential positive influence on children and families.
2. They view themselves as growing, learning, "becoming" professionally no matter what their training and how long their experience.
3. They have confidence and trust in themselves and the children they care for. They work with children with the attitude of "We know each other, we like each other, we can live well together, we can handle any situation."
4. They have fun. Watching them one gets the impression that much of the time they are having a good time.

No one can expect a caregiver, even one who starts out with these characteristics, to maintain them without help. Think about the principles of care for young children in your centre. How similar are they to the principles underlying the work situation for adults?

It is healthy for staff in child care occasionally to step back and take a look at adult relationships in the centre and ask themselves the following questions:

1. What happens when there is disagreement between staff members? Can it be brought out into the open?
2. Are there open channels of communication?
3. Is the director approachable?
4. Am I supportive of other staff? Do I ever tell my co-workers that they have done a good job?
5. Are my needs being met in the work situation? Am I helping to meet the needs of other staff?
6. What would improve the morale and skills of staff in the centre?

OTHER RELATED SHEETS:

2. What is a Caregiver?

These notes have been prepared for people working in day care. Other sheets in the series are available from **the Lady Gowrie Child Centre, 36 Newry Street, Carlton North, Vic., 3054.**

The Director's Challenge

Anne Willis Stonehouse

The director has many roles in a day care centre. She may be counsellor to parents and staff, economist, nurse, purchasing officer, teacher, cook and maintenance specialist. In some ways the job is similar to that of a solo parent with a very busy, large, active family.

The loneliness of the job is one of its most challenging aspects for some directors. In even the best centres, the person in charge may sometimes find herself a target for workers' complaints against the system, personal frustrations and problems. The scope of the director's job is tremendous, including staff selection, training and evaluation, relating to parents, building and maintaining links with the community, and daily operation of the centre.

In addition the majority of her time is spent with tasks that fall into a huge miscellaneous category. These are the tasks that arise suddenly, leave her exhausted at the end of the day, even though she may not have accomplished anything she intended to do when she arrived at work!

Her day is taken up with making important decisions affecting the staff, the families and the functioning of the centre. Her "normal" day is often an "unusual" day – a hectic day of unplanned visitors, sudden crises, staff absences and equipment breakdowns. Consequently, one of the most important qualities for a director is flexibility, a capacity to cope with unexpected events.

The director must constantly consider the needs of three groups, parents, children and staff. Sally Provence, in *The Challenge of Day Care* (1977), argues that a child care centre should be looked at not just as a place for children or as a substitute for home care, but rather as a place where big people and little people spend a large part of their lives, and where a second group of adults, namely parents, though not physically present, have a large investment. According to Provence, a child care centre should be a place where healthy human relationships are critically important. Provence suggests that a wise director takes a "developmental approach" to all staff members. This involves asking such questions as:

- Where are staff individually in their knowledge of children?
- What are the main developmental tasks of the caregivers?
- What are each staff member's strengths and vulnerabilities?
- How can I help them develop?

The director needs to have an awareness of staff strengths, and a positive attitude in her work with staff. She should demonstrate in her own work and instill in caregivers the following:

1. The conviction that the day care service is important – a positive support to families and children – not a second rate situation for "poor little children who cannot be at home with their mothers".
2. The assumption that caregivers (and directors!) are always learners, no matter how long they have been on the job. The director must model an attitude of learning, curiosity about different ways of doing things, readiness to learn and discuss new ideas. People who work with young children must maintain an attitude of "teachableness", a creative approach to their work.
3. A sense of pleasure must be at the centre of the work. Boosting morale and keeping caregivers happy is a very important part of the director's job.

WHY THINGS GO WRONG

1. Caregivers often lack support and praise. The children cannot give it; often parents do not give it. So other staff members and the director must give it to one another.
2. It is easy to settle into doing things the same way month after month, even year after year – the same room arrangements, the same routines, the same daily schedule. The children appear to be "under control", everything is running smoothly and there is a tendency for staff to "switch off".
3. The pressure of the job may lead to discontent and deteriorating staff relationships. Caregivers become peevish, nag each other, complain about their work load, criticise each other. They may express these feelings or may deal with them internally by developing headaches, stomach upsets and other minor illnesses. Ongoing complaints about other staff or the work situation in general will eventually eat away at morale and bring down the quality of the program. One caregiver with a carping, critical attitude may "infect" others.

BUILDING STAFF STRENGTHS

1. There must be clear lines of responsibility so that people know what is expected of them. Jobs need to be clearly defined and allocated in a spirit of friendly cooperation and flexibility.

2. Ways of resolving inevitable staff tensions must be established. "Open communication" should be a goal. It is necessary to maintain as a staff a balance between focus on the adults' personal development and focus on the children's needs. The director should not always be a judge. She needs to make it easy for people to get together for discussion, or "horizontal communication".
3. Staff meetings are essential. The director should involve staff in *decision making* when possible. But if a decision is not going to be a group decision, she should not pretend it is. Rather, she should involve staff in *consultation*, then make a firm decision herself. She should be open about dilemmas and difficulties, not gloss over them or worry about them in isolation.
4. Awareness of staff needs is important. It may prove a useful exercise to take the following list of needs and look for one example of a staff member having that need met in your centre, and an observation of a situation where a child is having the need met. What do you think about having staff do this exercise?

compassion
children:
staff:
support and encouragement
children:
staff:
acceptance as individuals
children:
staff:
recognition for a job well done
children:
staff:
challenges
children:
staff:
security
children:
staff:
freedom
children:
staff:
other needs
children:
staff:

Better still, when staff are together you might ask them to make a list together of children's needs. When this is done, look at it as a list of adults' needs. What would you add, subtract or alter?

There may be a tendency to pay little attention to adult relationships in a centre. After all, some might say, the concern is with children. But just as is true within a family, children will thrive in a centre where there is an atmosphere of caring among adults, where they can see adults growing and learning, resolving conflicts constructively. A director who concerns herself with adult relationships in her centre can assure herself that the payoff in terms of the quality of experience for the children will be direct. A good centre for children is also a good place for staff and parents.

Directors reading this sheet may think "Yes, I know I'm supposed to do all of those things, but who supports me so that I can meet the needs of staff?" This is a real problem for many directors who work alone, under much pressure, and with little support.

It is known that people can meet other people's needs only if their own needs are met. Directors need professional back-up and support, but they also need contact with other directors. This contact may provide solutions to problems sometimes, but it certainly provides confidence and comfort in finding out that other directors have similar challenges and difficulties.

QUESTIONS AND SUGGESTIONS:

1. List the jobs that you do over a day's time.
2. To whom can child care directors in your community turn for support?
3. How can directors support each other?

OTHER RELATED SHEETS:

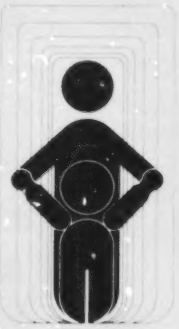
2. What is a Caregiver?
3. Staff Needs, Relationships and Morale
5. Attitudes to Parents
6. Relating to Parents Daily

REFERENCE:

PROVENCE, S. *et al. The Challenge of Day Care.* London. Yale University Press, 1977.

Note: This material has been adapted from an article by the author in *The National Journal of Child Care*, Vol. 1, No. 2. January, 1979.

These notes have been prepared for people working in day care. Other sheets in the series are available from **the Lady Gowrie Child Centre, 36 Newry Street, Carlton North, Vic., 3054.**



Attitudes to Parents

Anne Willis Stonehouse

For many caregivers, the most difficult and challenging aspect of caring for children is relating to their parents. This is an area where caregivers need a lot of support from directors and other staff members. Yet for those caregivers who do it well, nourishing a relationship between centre and family that promotes understanding, belongingness, and caring between parent and child can be one of the most rewarding parts of the job.

Some people may ask, "Why bother if it is so difficult? After all, they bring their children to be cared for; aren't they turning them over to us?" The answer to those questions is simple. Most people who work with young children, if asked why they do so or what they hope to achieve, would probably answer that they want to help them to develop into healthy happy human beings. It has been shown over and over that it is almost impossible to have a positive influence on children's lives without also involving parents. At a simpler and more basic level, a reason for involving parents is that it is *their* child being cared for in the program.

Most parents, even ones who choose to use child care, do not want to be replaced in the lives of their children. If centres make parents feel unnecessary or inadequate the result will be destructive for children and families.

WHAT SHOULD NOT HAPPEN

All caregivers and centres have some impact on parents, even when parents are actively discouraged from being present or asking questions or getting involved, or where children are handed over silently in the morning and afternoon with no exchange of information. Some caregivers, without meaning to, may make parents feel stupid, decrease their confidence in themselves by telling them what to do or giving unasked-for advice. It is easy, even without meaning to, to give parents the feeling that you know more than they do about their child, that you do a better job than they do. Parents are likely to view even the most inexperienced caregiver as an authority on children.

Some parents who use child care feel somewhat guilty or uncertain leaving their children. Some may feel inadequate, not very good about themselves as parents. Many of them are living with pressures and stresses that keep them from doing as good a job as they would like to with their children. Some parents who have negative feelings about themselves may relate to the centre in ways which confirm that they are not good parents – that is, they do not cooperate, they withhold information, they are critical of the centre, perhaps they even act disinterested or care poorly for the child. It is very difficult for staff to be tolerant and supportive of parents who are critical of them or who are neglecting or mistreating a child.

Other centres relate to parents by trying to involve them, but the involvement is translated into "We will let you come and do things for us". In other words, some centres find ways to enlist parents' help safely, in ways that will not interfere with the program as it is run by the staff. Making doll clothes, mending fences, running cake stalls to earn money for the centre are good ways of involving parents, but if those are the only level at which parents can be involved, they are only token gestures. There is a difference between truly working with parents and letting them help out.

Occasionally one hears a person working in child care say "We try, we want parents to be involved. We invited them to three night meetings last year but very few came. They just are not interested." There are a number of possible reasons why they did not come. Perhaps what was offered was not what they wanted. Working parents have little time, many pressures, are often tired; they may feel threatened, apprehensive, unimportant. Why should they come to a meeting if the message to them on a daily basis is that they are not needed?

The initiative and perseverance in creating good relationships with parents must come from the people working in child care. With some parents, staff may have to try hard for months before making any progress, but they must not be put off by initial disinterest or uncommunicativeness of a parent. The staff sets the standard.

WORKING WITH PARENTS

A more desirable kind of relationship between staff and parents is one of *support*. This may include giving information and involving them in the centre's activities. The main aim however, is to increase parents' competence and confidence in themselves as well as their pleasure in and understanding of the child. These things come about not primarily through attending meetings or helping with projects (though they can contribute), but rather in the daily interchange between caregivers and parents who have a relationship of mutual respect.

Caregivers must take care to see themselves as *working with parents* and *sharing care of the child* rather than *substituting for parents*. It is not helpful

to give parents the idea that anyone can replace them. Caregivers should not take pride when a parent says "You get so much more out of him," or "She's so much better for you than for me". They should avoid feelings of competition with parents for children's affection.

A supportive relationship with parents must be founded on mutual respect, acceptance of parents as having much to contribute as well as much to learn. This is easy to say, yet difficult to put into practice. It is challenging enough for caregivers to relate well to parents when they share the same values, life style and ideas about child rearing. How very difficult it becomes when because of cultural background, individual circumstances and beliefs, parents' ideas are very different from what caregivers think about what is best for children.

The most difficult task of all for a caregiver is to be supportive and friendly to a parent who, for whatever reason, does not relate in a loving caring way to her child.

OBSTACLES

There are numerous obstacles to good relationships between parents and caregivers:

1. Lack of time. Building any relationship takes time, and most centres are not staffed to permit time for parents and caregivers to get to know one another or to share information about children.
2. Lack of skill and motivation. Often caregivers just do not know how to go about establishing a relationship with parents. Even in formal training programs, relatively little attention may be paid to this aspect of caregiving. Because it is so difficult caregivers, whose jobs are already difficult without this extra responsibility, may pay lip service to supporting parents but actually avoid it.
3. Parents' attitudes. Parents may come to child care feeling unwanted, suspicious, hostile, threatened, guilty, apprehensive, thinking that they can contribute little or nothing, and having their own needs unmet.
4. Staff values. Some caregivers will find it very difficult to accept parents, to refrain from making judgements and being very critical of them.
5. Intensity of attachment to child. Parents' emotional involvement makes it impossible for them to be detached and objective about their children. Their investment and commitment are for a lifetime and the caregiver's involvement is only temporary, and therefore she can be more objective in many situations.

Only if child care involves sharing between parents and caregivers, working together for the child's benefit, can it in the long run be beneficial to children and families.

QUESTIONS AND SUGGESTIONS:

1. How many different ways are parents involved in your centre?
2. Think about how you would feel if you were a parent bringing a child to your centre. Would you feel welcomed, involved?
   What signs do parents at your centre see that they belong there too?
3. How might a caregiver's belief that mothers should stay home with young children if they can, interfere with her relationships with parents?

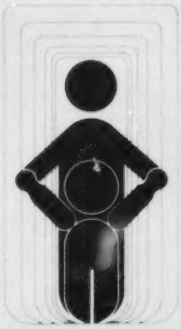
OTHER RELATED SHEETS:

6. Relating to Parents Daily
7. When a Child is New
8. Arrivals and Departures

OTHER RESOURCES:

Willis, A. "Working With, Against, or Apart from Parents" *Australian Journal of Early Childhood*, Vol. 5 (1), March 1980.

These notes have been prepared for people working in day care. Other sheets in the series are available from **the Lady Gowrie Child Centre, 36 Newry Street, Carlton North, Vic., 3054.**



Relating to Parents Daily

Anne Willis Stonehouse

When staff in a centre are asked about relationships with parents, often they reply by describing meetings or social occasions organized for parents, membership on committees, or reporting parents' satisfaction with services provided. These are important and valuable. However, the most meaningful way to assess the quality of relationships between parents and staff is to look at what happens on a day-to-day basis as parents come and go in the centre. Interactions between parents and staff may be very brief on some days, hardly more than a smile, a hello and a brief exchange of information, but they are nevertheless important.

How can caregivers relate on a day-to-day basis in a supportive way to the parents of children in their care? The following are some guidelines.*

1. Begin with an attitude of respect for parents, for the insight and information they have about their child and for the requests that they make.
2. Remember that, as a caregiver, you may be threatening to parents. Be cautious about giving advice.
3. Do all that you can to make parents feel welcome at the centre. Let them know that their presence is not an intrusion. An open door, the offer of a cup of coffee, a warm smile and a friendly hello are small but important ways of saying to parents, "You belong here too".
4. Make clear expectations and responsibilities in the beginning – both of the centre and the parents. Encourage parents to ask questions about the centre. Some centres find it useful to compile a leaflet for parents about fees, hours, days the centre is closed, and other information.
5. In the beginning, as much as possible, have one caregiver (or as few as possible) relate to the parents until they become familiar with the centre staff.
6. Remember the importance of continuity of experience for the child at home and in the centre. Ask parents how they care for the child, what he or she is like at home. Use them as sources of information.
7. Involve parents whenever possible in making decisions about the child's experience, even when caregivers feel capable of making a decision alone. For example, a decision about when to begin toilet training should be made jointly by parents and staff, and should be based on signs of readiness in the child. Parents and caregivers can be teaching the child at cross purposes if they do not work together. For example, if caregivers are encouraging a toddler to assert himself, to stand up to other children, and parents are teaching the child to submit or give in, the child will be confused by the conflicting messages.
8. Talk with parents. Establish from the beginning a pattern of friendly conversation and exchange of information at arrival and departure times. Of course sometimes it will be necessarily brief. What transpires on a daily basis between parent and caregiver is far more important than membership on centre committees, attendance at meetings, participation at working bees.
9. Gradually get to know parents personally as a relationship of trust and sharing is built. Let parents get to know you.
10. Keep in mind that parents are not just parents – they are workers, spouses, people. This has two implications for caregivers: one, that parents may have concerns, worries, pressures in areas other than their relationships with their children, and these may sometimes prevent them from doing what appears to you to be best for the child. The second reason for keeping this in mind is that it is not always necessary to relate to parents as *parents*, to talk to them only about their children.
11. Share everything positive about the child with parents in an honest, unpatronizing way, even if parents do not seem interested. Point out to parents the specialness of their child.
12. Share unpleasant information, or "bad news", more selectively. Announcing that Johnny hit three children and dumped his lunch on the floor is not the best way to reunite a tired child and a tired parent at the end of the day. Knowing when and how to give information and advice to parents is one of the most challenging jobs of a caregiver.
13. Avoid stereotyping parents because of their cultural background. This is as important as being accepting and respectful of cultural differences in child rearing. Often one hears comments that certain ethnic groups overdress their children or do not approve of their children getting dirty. Try to get to know individual families without

* Some of these guidelines are contained in "Working With, Against, or Apart from Parents" by Anne Willis, in the *Australian Journal of Early Childhood*, Vol. 5 (1), March 1980. Readers may find this article useful.

having too many ideas ahead of time about what they are like.

14. Accept individual differences in parents and in their relationships with their children. For some parents, giving them time away from their child is the best way to help them.
15. Acknowledge that there will be some parents that you cannot relate to well. Hopefully some other staff member can.
16. As a staff working together, support each other in relating to difficult parents, particularly those who are being uncooperative, critical or very demanding.
17. Be a good listener.
18. Know the limits of your own competence. Be ready to refer parents with problems to someone with more knowledge.
19. Try to see things from the parents' perspective. How might parents feel, for example, about missing much of their child's growing up; about leaving a child with someone whom they think knows more and does a better job than they do? Remember that parents may have difficulties separating from their child even when the child does not find it difficult.
20. Keep trying; don't give up on difficult parents.

There are many lists of children's needs. One item that should be on those lists but often is omitted is that all children need someone to support their parents. Caregivers in child care are in a key position to meet that need.

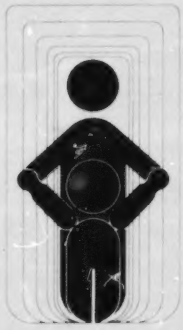
QUESTIONS AND SUGGESTIONS:

1. Observe the interactions between caregivers and parents in your centre. Is the tone friendly and warm?
2. Is information exchanged both ways – that is, do caregivers encourage parents to provide information about the child?
3. What about "difficult" parents – the ones who don't seem interested, who act as though they want to get away as quickly as possible? How can staff help them?
4. What can you do when parents talk with you about problems or issues that you don't know enough about or feel uncomfortable discussing?

OTHER RELATED SHEETS:

5. Attitudes to Parents

These notes have been prepared for people working in day care. Other sheets in the series are available from **the Lady Gowrie Child Centre, 36 Newry Street, Carlton North, Vic., 3054.**



When a Child is New

Anne Willis Stonehouse

Coming to a child care centre for the first time or changing from one centre to another can be very frightening to a child. If you have any doubts, put yourself in the child's place. Think of starting a new job, moving to a new neighbourhood or community, or even going to a social gathering, arriving late, not being able to spot anyone you know. The feelings an adult has in these situations are probably similar to those of a child coming into child care, except that an additional factor for the child is that it may be a totally strange situation, unlike anything experienced before.

Even when the child does not show any outward signs of apprehension, there are many new people and situations to cope with, and it is important that the initial days be handled well so that the child feels secure and comfortable. Some children may appear to settle in amazingly well at first, and later show negative feelings such as being unhappy and withdrawn, having trouble separating or being uncooperative.

People often ask at what age a baby will notice a change in caregiver or place, — when changes begin to matter to them. Even a very young baby will notice a difference in the situation — different people, smells, sounds, a different style of handling. They will notice but may not find the difference distressing until after about five or six months of age. Of course this varies from child to child but by this time babies have usually developed a strong attachment relationship with a parent, and they may be distressed when separated from them. Around this age also many babies develop a fear of people whom they do not know, and this may make adjustment to child care difficult.

There are great individual differences among children, as there are among adults, in flexibility or ability to adjust to changes. Some people, whether babies or adults, adjust quickly and easily, others need unpressured time to get used to new things. Still others respond negatively at first to almost everything new and actively resist change. Children like this may have experienced many changes, and they will undoubtedly need special consideration, patience and attention in child care. Each child should be helped to adjust at his or her own pace.

Having someone familiar with them helps children adjust to new situations. Centre staff should encourage parents to stay with the child for some time at the centre. The precise amount of time needed will vary depending on the child, but for some children the period of adjustment may take days or weeks. Of course it is not usually possible for a working parent to stay with the child as long as would be optimal, but the importance of this comfortable introduction to the child's adjustment cannot be overemphasized.

When parent and child are at the centre together, if they are left completely on their own and ignored by the caregivers the child's adjustment will not be aided. If this happens the child will get the idea that this is a place that she and Mummy come to play together. Rather, the time should be used for the caregiver and child to build up a relationship in the security of having the familiar person, the parent, present. Even for a baby, seeing her parent relating in a friendly way to a strange person can help to overcome her fear of the new person.

There are other major rewards of having a parent around. The caregiver can observe the parent's style of caregiving in areas such as feeding (with a baby), comforting in distress, helping to go to sleep, talking, discipline, and she can build up an understanding of the care the child is used to. She will not always be able to offer the same care, but being familiar with it will help her to understand the child's behaviour.

Exchange of information between parent and caregiver during this time about the child's dislikes will help the caregiver get to know and understand the child much more quickly than if she has to figure things out on her own. Her aim should be to make the care in the centre somewhat consistent with home care whenever that is in the child's best interests. The value to the parent is that he or she becomes familiar with the caregiver and with what the child will experience when they are separated from each other.

Parents and caregivers sometimes assume that if the parent stays long enough the separation will happen painlessly and easily. This is not so with some children. When the time comes for the parent to leave the child, hopefully for a brief time at first, then gradually for increasing amounts of time, the caregiver should be ready to support the child and the parent.

It is tempting to have the parent sneak away when the child does not notice, but this is neither fair nor helpful for the child. Again, you might put yourself in the same situation. How would you like it if you were going to part from someone you cared for very much, and when you were not looking they sneaked away? That experience breaks down the child's feeling of trust and security, and might encourage a child to be clingy. She might learn that if she moves

far away, or gets very involved, she may be left. The caregiver can help the child face the leaving and cope with it constructively by helping her to get involved in play. It is much easier to cope with Mummy leaving when your caregiver is holding you or standing beside you, than if you are on your own.

Parents may have difficulties in separating from their child, even when the child is not distressed. This should be viewed sympathetically by the caregiver, not critically. Some parents cannot leave easily, they almost leave and do not, and some seem unconsciously to be trying to make the child upset about their leaving. These parents need help in leaving. When they say they are leaving, they should be helped to leave. Parents' uncertainty can be upsetting to a child, even a baby. Parents should be encouraged to telephone during the day to find out how the child is, or better still to stop by for a visit. This should be welcomed, not seen as an imposition or intrusion.

HELPING THE CHILD ADJUST

For the sake of parent and child, it is best if a minimal number of caregivers relate to a new child – preferably one initially, until the child becomes familiar with the daily routine and the people. Getting to know one new caregiver while becoming accustomed to others at a distance is much more manageable than having to adjust to several at a time. Some children will plunge right into the midst of activities and adjust to the daily program, while others will want to stand aside and observe from a distance, getting involved only when they are familiar with what goes on. Some caregivers tend to pressure children into being involved. They see lack of involvement as a sign that the child is unhappy. It is best to let them adjust at their own pace and enter in when they are ready. This does not mean that the caregiver should ignore them. She can still be friendly and inviting, encouraging without putting pressure on the child to take part.

Some children may be fearful of strange toilets. Others may resist eating in a group or eating at all until they are more familiar with the situation. These children should not be pressured, as it will only increase the amount of time it will take to adjust.

During the day, it may be comforting to mention Mummy and Daddy to two to five year olds, and reassure them that they will be coming back later. Caregivers should avoid saying that parents will be back soon unless they are expected within five minutes, as young children have little sense of time. One hour can be forever! Having a familiar object from home – a teddy or blanket or object belonging to the parent for example – may be comforting to the new child. Extra cuddles, affection, and attention from the caregiver will also help to make those first days in child care as pleasurable as possible.

At the end of the day, the report to the parents should be honest but sensitive. The caregiver should keep in mind that there are two things most parents probably do not want to hear: first, that their child was miserable all day without them; second, that their child did not appear to miss them at all.

Most parents want to hear something in between – that their child showed some signs of missing them but was happy and involved during the day.

Helping a child to adjust to child care can try the patience of parents and caregivers who often want to hurry the process. To this end, sometimes adults insensitively profess in the "clean break" philosophy – no easing into the change, no gradual transition, just get it over with. Admittedly, sometimes the process can be drawn out too long to the detriment of the child. Decisions about introducing a child to a new child care situation should be made with two considerations: first, how can we make the process as pleasant and comfortable as possible for the child, and secondly, given the child's age and ability to understand, what must we do to ensure that this change makes sense to the child. The pay-off to child, parents, and caregivers will make sensitive handling worthwhile.

QUESTIONS AND SUGGESTIONS:

1. What are some of the obstacles to helping children adjust to child care?
2. How might the child's experience before coming to child care influence the adjustment?
3. How can centre staff convince parents of the importance of helping a child settle in?
4. Discuss with other staff members changes you have faced and adjustments to new situations. Do you adjust easily? What helps?
5. What do you think about making the information in this sheet available to parents who are enrolling a child in your Centre?

OTHER RELATED SHEETS:

5. Attitudes to Parents
6. Relating to Parents Daily
8. Arrivals and Departures

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Arrivals and Departures

Anne Willis Stonehouse

What happens at the beginning of the day to a child in child care and again at the end of the day plays a large role in the child's contentment and well-being. A hasty hectic handover to the centre, being plopped when only half awake on the cold floor while the parent makes a speedy exit and the caregiver busies herself with other matters is not a happy start to the day!

For the parent, the daily interaction with the child and caregiver at the time of leaving the child and again when they are reunited, influences the parent's feelings about the child as well as about child care. For the caregiver, especially one who is sensitive to the special needs of parents and children at these times, the beginning and the end of the day can be one of the most hectic challenging times of all. Often there are not enough staff at either end of the day for the number of jobs that have to be done in addition to caring for children and relating to parents, and at the end of the day everyone – children, caregivers, and parents – is tired and probably not at their best. Yet these are the critical times for nourishing good relationships between parents and caregivers, one of the most important aspects of quality child care.

BEGINNING OF THE DAY

It is important that the staffing pattern in a centre allows the people on first shift to have at least fifteen minutes to open the centre and begin to set up before receiving children. Having parents and children waiting on the doorstep when the first caregiver arrives must mean a hectic start to the day. The value of talking with parents as they bring the child in cannot be overstressed. Centre staff need to know what has happened since the child was there last, and a friendly exchange between parent and caregiver, even very brief, does much to cement a strong supportive relationship. Parents may be in a hurry, but the expectation that there will be some kind of daily exchange with the caregiver should be clear from the beginning.

Occasionally one sees a parent rush in to the centre with a child and swiftly, silently hand her over. For the child, a slower more sensitive transition from home to centre makes the daily adjustment easier. The rewards for encouraging parents to stay for a few minutes in the morning to settle their children in far outweigh the disadvantages. Parents feel a greater sense of belongingness; children feel more secure. Some children will need help from the caregiver in making the transition – a cuddle, a hand to hold, and help in entering the group and getting started. It is likely to be easier for the child to say goodbye to a parent happily if a favourite caregiver is offering support by holding him or being close beside him rather than leaving him on his own to cope. Also, it is easier if the child takes an active part in separating from the parent rather than passively being left. One mother, in discussing this, said of her three and a half year old, "On good days, I leave Eric while he is playing. We say goodbye and he continues playing. On Eric's not-so-good days he opens the door, sees me out and closes it behind me".

Some parents need to be helped to leave when it is time to go, whether or not the child is upset. It can be very painful for a parent to leave a distressed child, and both parent and child will need support at this time. Some parents will make it more difficult for the child by prolonging goodbyes – a long period of the parent saying he or she is going to leave but staying, or leaving and re-appearing several times. This is likely to increase the child's distress. Even babies can pick up parents' uncertainties.

Other parents will need to be discouraged from sneaking away when the child is not looking, in order to avoid the pain of parting altogether. Parents may be tempted to do this especially if the child is likely to get upset, but in the long run it does not make a child feel secure and may encourage clinginess and dependence. This experience does not teach a child to trust adults. Think how you would feel in the same situation, if you were parting from someone you cared about and when you were not looking they sneaked away without saying goodbye.

Comforting the child who is upset when the parent leaves, saying in some way through actions and words "I know you are sad", and then helping him to get involved in activities is much better than just leaving him on his own or distracting him without acknowledging that he is upset.

It is obviously not possible for a caregiver to spend even a little bit of time with each parent and child if they all arrive at once. Therefore it is a good idea, whenever possible, to stagger children's arrival times, giving each family a somewhat flexible fifteen minute interval for arrivals, depending on work and travel schedule. That means that all children in full time care are not arriving at the centre during the same interval, and perhaps not even spending the exact same length of time there. This may be difficult to implement, but it is necessary if relating to parents on a daily basis is a priority.

THE END OF THE DAY

Late afternoon can be a difficult time in a child care centre. Everybody is tired, staff often have responsibilities for cleaning as well as for caregiving, play materials and equipment may have to be put away even while there are still children present. Caregivers should remember that no child wants to be the last to go, and some children, even babies, may get upset when other children's parents arrive and theirs does not. These children who stay need something special to do that is quiet and relaxing. Perhaps certain special play materials could be reserved for these times only.

Tired parents return at the end of the day, most of them hoping for a warm welcome from a happy child. They may or may not get it. Some children, even older babies, may react to the parents' return in a very matter-of-fact way, show little positive or negative feeling, and parents may find this disappointing or distressing. This reaction probably indicates that the child feels secure in the centre, trusted all along that the parent would return, and so the reappearance is pleasurable but is also "no big deal". It is an expected event that does not call for stopping all activity and rushing into their arms. Caregivers should explain this to parents and let them know that it is normal for some children to react this way. Other children may react in a more negative way when their parents return – ignoring or avoiding them, resisting leaving with them, and sometimes actually showing distress. This can be an awkward, embarrassing, unpleasant time for the parents unless the caregiver explains and reassures the parent. If the caregiver says nothing or acts embarrassed, the parent will wonder if the caregiver is thinking that there is something wrong with the relationship. This reaction by the child is not uncommon, it does not usually mean that the child prefers the centre and the caregiver to home and parents.

It may mean one of several things, including:

1. Testing to see who is in control, who is setting limits, the parent or caregiver.
2. Expressing some anger or annoyance at the parent for leaving.
3. Releasing tension, relaxing controls, showing feelings that have been held inside all day, and the arrival of the person closest to them allows the release of these feelings.
4. Not wanting to stop what they are doing; transitions, changes are difficult for some children to handle.

Sharing with a parent all the good news about the child during the day is perhaps the best way to reunite a tired child and a tired parent. Parents want to hear indications that their child is considered special by other people. If the child did not have a good day, then the caregiver should indicate that tactfully and supportively, if that would be helpful, or perhaps give no report. Discussion of a behaviour problem or some other concern about the child must be introduced carefully and on a day when the parent is not looking tired and hassled.

Good beginnings and endings to days in child care rely on caregivers' skills and sensitivity as well as staffing conditions designed to allow the day to start and finish well for everyone.

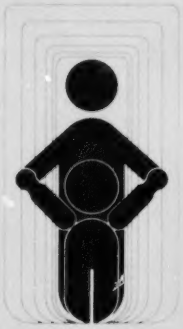
QUESTIONS AND SUGGESTIONS:

1. Discuss with other staff members the needs of parents, staff and children at the beginning and end of the day. What can be done to make those times more pleasant for everyone?
2. Can you think of some special activities that can be offered to children as they wait until their parents come?
3. Are there some parents who have difficulty leaving their children?
   Do you have any ideas why? Can you help them?
4. Are there some children who have difficulty letting their parents go? How can you help them?

OTHER RELATED SHEETS:

6. Relating to Parents Daily
7. When a Child is New
9. Daily Program
11. An Overview of Routines

These notes have been prepared for people working in day care. Other sheets in the series are available from **the Lady Gowrie Child Centre, 36 Newry Street, Carlton North, Vic., 3054.**



Daily Program

Anne Willis Stonehouse

Having a plan for the day is important for caregivers and for children, but altering it is as important as having it in the first place. Children need the security of a somewhat predictable daily routine. However, a daily plan must be based on the needs of the children, and these are somewhat changeable from day to day. Caregivers also need the security of a daily routine, but they must have the confidence to alter it when it seems appropriate. The extremes – rigidly adhering to a lock-step routine each day, or on the other hand, having no plan – are disastrous for both staff and children.

What are children's needs with regard to a daily program? Following are some needs; you may be able to think of others.

1. Freedom, the opportunity to choose where they are and what they are doing.
2. Limits, the security of knowing what they can and cannot do, and especially that caregivers will help them guide their behaviour according to the limits.
3. Lack of pressure, the opportunity to make some choices, even to do nothing but watch for a time.
4. Variety in places to spend time and things to do.
5. Sameness, predictability in persons, places, routines.
6. Peace and quiet, moments of serenity.
7. Opportunities to get away from the group, for privacy, for playing alone.
8. Personal attention from adults.

Certainly the amount of detailed planning possible depends on time available to staff. Some programs unfortunately are staffed so that caregivers have no time set aside to talk about programming and make plans for any needed changes. This situation makes it easy for caregivers to do the same thing day in, day out, without taking into account changing needs of children.

Whether it is general or very detailed, the plan for a daily program within a group should be evaluated regularly by caregivers to see if it is still meeting the children's needs.

The following guidelines may assist in looking critically at the daily program:

1. Individualize the program. As much as possible, avoid having to force or pressure children to all do the same thing at the same time in either play or routines. Children's activity levels, interests, needs for quiet and daily schedules differ, and these differences should be taken into account.
2. Minimize waiting time, for it is a waste of time for children and may require controls beyond their capacities. It takes time to work out ways of making transitions smoothly and easily and without creating boring gaps in the day for children, but it is worth the effort.
3. Try to gear the daily plan around the general moods and energy levels of the children. For example, offer active physical play when their energy level seems highest, challenging activities or ones requiring concentration when they are rested and alert, quiet relaxing activities when they are tired or overly excited.
4. Give children the opportunity, as they would have in a good home, to be with children their age as well as the chance to be with older and younger children.
5. Use routines as a time for play and learning; do not rush through them. Activities such as eating, sleeping, toileting, nappy changing, dressing should be incorporated into the long day as further opportunities for caregivers to give children undivided attention, increase their self-confidence and help them build skills.
6. Offer choices in activities. Put an interesting variety of play materials on low shelves. Throughout the day be sure children have options about how they are spending their time. Throughout the day there should be a variety of activities, with changes and special activities introduced at different times so children do not get bored. So-called table activities should be offered along with others, not at a special time in the day. Children should be invited to take part in group activities, but not forced.
7. Use the out of doors not just as a place where children can run around to "let off steam", but as another space where activities for learning of all kinds are offered. Most activities offered inside can be offered outside as well.
8. Minimize the situations that require an excess of sharing, cooperating, working together. Especially for under threes, but for all children in child care, being with other children all day is difficult, sometimes requiring more self control than the child has.
9. Allow time for easy pleasant arrivals and departures, including time to talk to parents.

A number of factors might cause a caregiver to alter plans – the children's mood, a change in the weather, an unexpected happening (a road machine to watch outside, for example), the children's special interest or lack of interest in an activity, the presence or absence of one or several children, or a staff change.

Caregivers should view a set-out plan as secondary to children's expression of need. For example, she should be flexible enough to allow a child who is literally dropping off to sleep at the lunch table to sleep first and then eat, even though the schedule says it is lunchtime. The daily program must also take into consideration the caregiver's needs for breaks away from the children and fatigue at the end of the day.

Perhaps the ideal daily program is one with built-in options, one that gives guidelines but allows for spontaneity.

QUESTIONS AND SUGGESTIONS:

1. Discuss with other staff the general mood and energy level of the group you work with. For example, what are they like first thing in the morning, just before lunch, just before resting, after resting or sleeping, late in the day just before going home? How might this influence your plans for the day?
2. Do you have children whose individual needs conflict with those of the rest of the group? How can you take into consideration those children's needs? Give some examples.
3. What is a reasonable amount of planning that can be done in your group, given the amount of time available?
4. Look again at the list of children's needs at the beginning of this article. Identify through discussion which of the needs are the most difficult to allow for in your group.

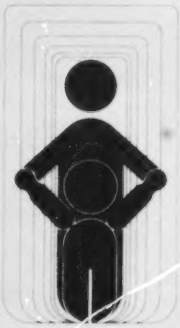
OTHER RELATED SHEETS:

8. Arrivals and Departures
11. Overview of Routines
12. Eating
13. Nappy Changing, Toileting, Rest and Sleep

OTHER RESOURCES:

"Teaching Notes", a series of sheets for people working with 3–5 year olds, treats topics relating to programming for young children. These sheets are available from the Lady Gowrie Child Centre, Melbourne.

These notes have been prepared for people working in day care. Other sheets in the series are available from **the Lady Gowrie Child Centre, 36 Newry Street, Carlton North, Vic., 3054.**



Family or Single-Age Grouping

Anne Willis Stonehouse

Groups with a wide age range are sometimes called "family grouping" and those with a narrow age range, "single age" or "same-age grouping". There is currently much interest in the relative merits of children in child care being in groups with a wide age range as opposed to groups where children are approximately the same age. People working in child care want to know which is best for children. As with most important questions, the answer depends on a number of factors. A good standard to use in assessing any child care practice is to ask how the experience for the child in these two kinds of groups measures up when compared with what the child would get in a good home.

Most good home experiences offer the following to a child:

- very few caregivers, so that the child and the caregivers get to know one another and develop a relationship of trust and attachment
- a "home base", a pleasant, attractive, comfortable place where the child spends most of his or her time, with the opportunity to visit new and different places occasionally
- a small group of people most of the time
- chances to be alone with the caregiver, some time with older and younger children, time with children the same age (especially for children over three)
- a somewhat predictable daily routine that helps the child make sense of the world.

Quality child care should also offer these things to a child. The younger the child, the more important is the sameness and predictability. That is, older children usually can cope more easily with changes in people, place and routine than can babies and toddlers. They can understand better, for example, that different people allow different kinds of behaviour, or that vigorous, loud, active play is acceptable in one setting but not in another. These differences are confusing to babies, and even distressing to some. Living with a wide variety of expectations is likely to slow down learning appropriate ways to behave.

What are some of the advantages of mixed-age or family style groups? The most obvious is of course that children enjoy and learn from being with older and younger children. Siblings can have more contact with each other. Older children may gain feelings of competence, caring and usefulness from helping younger, less skillful children. There is greater diversity for the caregiver in type of needs expressed by the children of different ages and this may be an advantage in that it increases the variety of her job. It is also an additional challenge. In fact she must always be "shifting gears", as she moves from feeding an eight month old to talking to a four year old about his painting, to helping a daring two year old climb to the top of the climbing frame. Sometimes she may have to do these or similar things simultaneously!

Advantages of single-age grouping are that the physical environment and play materials can be geared more particularly and appropriately to the developmental interests, needs and skills of the children. Obviously, there are some play materials that would be excellent for three and four year olds, but would not be safe for babies and toddlers. Anything of swallowable size would fit into that category. It is possibly easier to create a safe and interesting environment that allows exploring for a single-age group than for a group of children of different ages. Caregivers can focus their interactions more specifically on the needs of the age group. The daily program does not have to include consideration of diverse needs of a wide age range.

Whatever the age range, groups should be small, ideally under ten children, especially if babies and toddlers are included, and children should have a minimal number of caregivers totally. Sometimes the term "family style" is used mistakenly to describe a centre where three or four babies and toddlers are mixed in with fifteen to twenty older children for much of the day. This is not a family! Some children can cope with a rather chaotic, noisy, open set-up, but many, especially young ones, become overly excited or stimulated, frightened, irritated or withdrawn.

Probably the best set-up is a compromise, or modified family grouping, where children have a home base, a small group in its own space with one or two caregivers that they come to and leave each day, but during the day they have the opportunity to be with children their own age and ideally, to be in a variety of places. The chance to be with peers is more important for over threes than under threes, as under threes seldom actually play *with* each other, but rather alone or along side each other. However, a time when only under threes are in the group may make it easier for the caregiver to focus on less articulate, less vocal toddlers and babies. It is difficult sometimes in mixed age groups for babies and toddlers to compete for attention with bigger, more active, faster, more communicative three to five year olds. A decision about grouping in

a centre will depend on a number of considerations:

1. Arrangement and amount of space. The wider the age range in a group, the more play space needed in order to provide the range of activities, play materials and equipment appropriate for different age levels.
2. Ratio of caregivers to children, and skill and motivation of caregivers. A wider age range may require a higher ratio, and certainly demands skill from caregivers.
3. Preference of caregivers. As with any major change in a centre, people involved must feel positive about it if it is to work. Multiple age groups, and certainly "modified family groups" require more co-operation and communication by staff than do traditional age groups, as there will inevitably need to be more sharing of spaces as well as children.
4. Age spread of children. To mix ages, there needs to be a fairly even proportion of children across the age range covered. That is, it is difficult to mix successfully one or two older children into a group of younger ones, and a baby or toddler in with older children may not be "visible" enough to get what he or she needs.
5. Need to maintain small groups, some sense of order and predictability, is important, as is minimising the number of caregivers children (especially under threes) are exposed to.

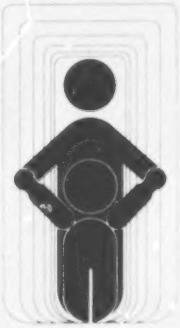
If a centre alters its grouping, staff and parents must be prepared to suspend judgement of how the new system is working until children and staff have had the opportunity to settle in and adapt to the change. This will undoubtedly take several weeks.

There is no one best way to group children and each centre must base a decision on its own particular needs and set-up.

QUESTIONS AND SUGGESTIONS:

1. How much like a family experience is your program for children?
2. How much contact do children in your centre have with older and younger children? Should they have more? Less? Why?
3. If you have age grouping in your centre, are there reasons for considering some version of family style grouping? Discuss advantages and disadvantages. Are there particular children whom you think would feel more comfortable in one or the other kind of groupings? What are some reasons?
4. What are some play materials that could be used safely and in a variety of different ways by babies, toddlers, and three to five year olds? What are some that would not be safe to include in a mixed age group?
5. What are some ways that caregivers can ensure that quieter, less outgoing children get as much attention as more assertive ones?

These notes have been prepared for people working in day care. Other sheets in the series are available from **the Lady Gowrie Child Centre, 36 Newry Street, Carlton North, Vic., 3054.**



Overview of Routines

Anne Willis Stonehouse

Routines include all aspects of the basic physical care of children – those things that must be done to keep them healthy, safe and contented. In sub-standard or custodial care aims of staff may not go beyond basic physical care, and often include an inappropriate exaggerated emphasis on efficiency and hygiene. Quality child care goes far beyond an emphasis on routines. However, children in child care spend a lot of their time in routine activities such as eating, resting or sleeping, toileting or having nappy changes, dressing. In fact caregivers, those who work with under two year olds particularly, may feel on some days that they give nothing but routine care. Because of the proportion of time spent in routines, and because children do not distinguish between learning or play times and other times, it is important that caregivers think about routines. They should be viewed not as time out from the program but rather as an integral part of the good experience offered to children. Children should not be rushed with the idea of getting through them as quickly as possible in order to get on with the program; neither should routines be occasions for boredom, for children to wait with nothing to do.

Flexible planning for routines gives children a sense of order and predictability about the day, but at the same time allows caregivers to base their program on children's needs. There is a great deal of emphasis on giving children choices and freedom in play and learning experiences, stressing the inappropriateness of expecting them all to do the same thing at the same time. The same principle applies to routines.

Children's need for autonomy, for making decisions and choices, for doing things for themselves and thereby gaining feelings of competence must be kept in mind in carrying out routines. Giving a child time to feed himself if he wants to, pulling the sock almost off and letting the child finish the job, asking the child which book she wants to read while she is resting are examples of superlative caregiving.

At the beginning and end of the day there are a number of jobs that must be done if things are to go smoothly. Often caregivers have to do these jobs as they greet parents and care for children. Many of the jobs are small ones, ones that are taken for granted when they are done. Left undone though, they create complications and difficulties for caregivers and children. Jobs such as changing linen on cots, folding nappies, checking that supplies of toilet paper and hand towels are adequate are small but critical to the smooth running of the program. It may help if staff develop a checklist of jobs to be done at the beginning and end of the day.

The arrangement of the physical environment affects the way routines are carried out. Materials and equipment should be displayed in an organised, accessible and attractive way, on shelves rather than in baskets or boxes. Play materials piled in boxes or baskets are asking to be flung around.

Tidying up, restoring play materials and equipment to order so that they look inviting and attractive to children is a task that caregivers do repeatedly over the day. There are four main reasons why this is better than waiting and tidying up all at once: firstly, it makes the job less overwhelming for staff and children; secondly, as a room deteriorates into a shambles, so does the children's play; thirdly, young children will trip and stumble over materials lying around; fourthly, equipment will be damaged and destroyed if left lying around. When picking up, caregivers should check to see that all pieces of puzzles and other play materials are present. Much equipment is spoiled by lost pieces. Certainly much of children's most constructive play is messy, but if the room and equipment becomes very disorderly, with materials scattered about, the quality of the children's interaction with the materials becomes less and less constructive. There must be a delicate balance on the caregiver's part between too much emphasis on order and tidiness so that it interferes with play, and too little attention, on the other hand, to the state of the physical environment and how its disarray might interfere with play.

A few minutes before it is time to pack away or stop an activity, children, even young toddlers, should be warned that it will soon be time to stop. Enlisting their help in a positive inviting way rather than demanding it makes it more likely that they will help. Caregivers should have reasonable expectations for the amount of help young children will provide. It would certainly discourage elaborate extensive block building for example, if children knew that they would be required to put away every block they used. Tasks should be small, manageable for the skill and interest of the child, and "helping" should be a game rather than an unpleasant but necessary consequence of play. If possible, packing away or transition times should be handled gradually and naturally, not with a grand sudden stopping of all activity while everyone madly cleans up.

It is useful for caregivers periodically to discuss routines, to see if they are being used as part of the children's good experience. It may be especially helpful to look for times in the day where children are waiting with little or nothing to do -- the early morning, the end of the day, before lunch, after sleep, for example, with the question in mind of how some of this waiting time can be eliminated. A good day in child care is one without abrupt starts and stops or excessive waiting; it is a day that flows naturally, where routines are based on children's needs.

QUESTIONS AND SUGGESTIONS:

1. Is it reasonable to expect toddlers to help pack away?
2. In your group do activities flow naturally from one to the other? How could you improve transition times?
3. What are the problem times? When are children waiting?

RELATED SHEETS:

8. Arrivals and Departures
12. Eating
13. Nappy Changing, Toileting, Rest and Sleep

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Eating

Anne Willis Stonehouse

Mealtimes and snack times in a child care centre are the best examples of routine activities that are rich with opportunities for play and learning. Certainly the eating situation will vary depending on the age of the children, but whether the children are eight months, two years, or four years, eating can be a social time, a time to communicate and enjoy other people, a time to learn new skills and feel the satisfaction of using skills mastered previously. Eating is also one of the earliest activities where babies can do something for themselves and derive the pleasure that comes from self sufficiency. Caregivers of babies and toddlers should see this as a more important priority than teaching table manners. Table manners are caught – not taught. As is true with many aspects of behaviour, young children learn manners through imitation and observation. If they eat with people who use utensils rather than hands, they will do this too eventually. Feelings of "I can do it myself" can be nourished by using very small jugs so that toddlers and three to five year olds can pour drinks, by offering some items on a plate – biscuits, bread or fruit, for example, and letting the child take one rather than selecting it and putting it on the child's plate.

If not managed well, mealtimes can easily become a time when children have to wait unnecessarily long. Gathering children at tables before a meal is ready to be served is wasting their time. Young children are not very good at waiting or sitting still. Forcing young children to sit at the table until everyone is finished is an example of demanding unnecessary waiting and asking for resistance and other uncooperative behaviour.

Caregivers should look at the physical environment where children eat. Are tables the appropriate height (just about waist high), or are toddlers trying to eat at tables that are chest high or higher? Do chairs allow children's feet to rest on the floor? For older babies and toddlers, do the chairs have sides as well as a back so that children feel secure? Is there enough space so that children are not sitting uncomfortably close together? Sometimes babies and toddlers, having moved beyond the stage of needing high chairs, are placed at tables with other children before they have the self control to keep their hands off other people and other people's food. It may be asking too much, for example, to expect one year olds to cope with sitting in chairs, feeding themselves, as well as relating to several other children and dishes of food.

Dishes and utensils deserve some attention too. Do spoons have short handles and rounded bowls? Do cups have wide bases to make them less easy to tip over? Do plates and bowls have sides? Especially for children who are just beginning to learn to use a spoon or fork, a bowl or dish with sides rather than a flat or round plate contains the food in an area and makes it easier to get at.

With regard to the food itself, nutritional value, pleasing taste and attractiveness are of greatest importance. A majority of familiar favourites with occasional new foods is most likely to be successful, and where centres include migrant children, attention must be paid to ensure that children have some foods that are familiar to them. The usual general guideline for quantities is one spoonful of each food for each year of age. Obviously this would be adjusted depending on the number of different foods offered. Being served large quantities can be very off-putting for a child. Small servings are better, with seconds given to those who want more. Trial and error seems to be the best way to determine the ways of serving foods that children are most likely to approve of. For example, one group of toddlers showed a distinct preference for carrot cubes over carrot circles, and many children seem to dislike mixtures of foods in which individual foods cannot be identified. For older babies and young toddlers beginning to show interest in feeding themselves, foods which can be picked up easily with the fingers encourage the process.

Adults often place great value on a pleasant atmosphere while eating, and children are no different. A peaceful calm atmosphere makes mealtime more pleasurable. Children may have difficulty settling down to eat after vigorous active play, and a quiet activity just before the meals such as looking at books or listening to a story may help. In centres where there is a choice, caregivers may want to consider the advantages and disadvantages of children all eating together versus eating in small groups in separate rooms.

As for the caregivers' role during mealtime, one of the decisions to be made is whether or not caregivers will eat with the children, probably eating a "token" amount and having their lunch break later. This depends mainly on the ratio of adults to children and the amount of help the children need. When it is possible, it is better for adults to sit with children rather than stand over them, for it allows them to provide a good model for eating habits, and can create a natural pleasant more

family-like situation.

A caregiver may need to encourage children to try new foods or remind them to eat when they become distracted, but she should avoid pressure tactics, nagging, bribery, threats, for these only make the child more resistant. If sweets are served they should be treated as part of the meal. If they are not nutritious and are used as bribes or rewards for eating other foods, children are being taught that they are more desirable, and this sets the stage for unhealthy food habits.

Young children may need the caregiver's help in feeding themselves, as they may become tired before they have finished. Self-feeding is hard work for babies and toddlers. Spills should be reacted to matter of factly, without calling undue attention to them, and caregivers should keep a sponge or cloth handy for wiping up.

Morning and afternoon tea can occur naturally and informally, with individual children or small groups being invited to come and have some as they are ready, rather than making everyone stop what they are doing and sit down together. It is worth encouraging children to eat in one area in the room rather than carrying food around with them, as they do tend to get distracted and to be a bit messy. However there is nothing sacred about eating at tables, so caregivers may want to offer morning and afternoon tea outside or allow children to sit on the floor or on cushions.

An observer could probably get a fairly accurate picture of the quality of a program by watching what happens at mealtimes, for it is a routine that has possibilities for meeting the developmental needs of children through quality caregiving.

QUESTIONS AND SUGGESTIONS:

1. List the things you enjoy about going out to eat with friends. Do you think these things matter to children? Why or why not?
2. Why do we usually hand food to children rather than let them select it from a plate? How would we feel about someone doing that to us?
3. What behaviour problems do you have connected with eating routines in your centre? Are some of them caused by the physical setting? Do caregivers perhaps expect too much?
4. How would you feel if someone made you eat a food that was unfamiliar or that you disliked? Why do people sometimes do that to children?
5. What are your expectations for children at each age level with regard to the eating routine?
6. What are the advantages and disadvantages of children eating all together and eating in small groups in their playrooms?
7. Identify some children who have difficulties or cause problems at mealtimes. Discuss possible causes and solutions.

OTHER RELATED SHEETS:

11. Overview of Routines

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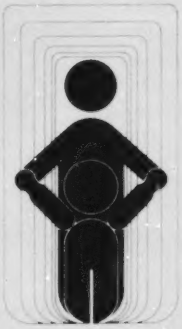

Nappy Changing, Toileting, Rest and Sleep

Anne Willis Stonehouse

NAPPY CHANGING

One wonders when there is a daily program posted on the wall in an infant room that lists "10.15 – nappy change", if that means that everyone is changed then whether they need it or not! It seems almost too obvious to state that nappy changes should happen as children require them, and caregivers must check frequently to find out when they are needed. There seem to be great individual differences in the extent to which children mind having soiled or wet nappies, so caregivers cannot rely always on children to tell them they need a change. It is much more appropriate if the "10.15 – nappy change" entry on the daily program means that at several designated points during the day the caregiver checks to be sure that everyone who needs a change has one.

The area set up for nappy changes should allow the caregiver to maintain contact with and be accessible to all the children she is caring for. Hygiene and cleanliness are a concern of course, but if nappy changing happens completely outside the play area, that means that for a substantial part of the day one caregiver may be occupied away from the group, and this could present problems.

In child care, a nappy change may be one of the few times that a young child has the caregiver's individual attention. It should be used to the extent possible as a time for talk and play and showing affection. Caregivers should avoid using words such as "naughty" or "dirty" in reference to elimination, as it influences babies and toddlers' attitudes toward their bodies. A mobile over the changing area, an interesting picture to look at (both changed periodically), something interesting for the baby to hold make the experience more interesting. An effective way of assessing a caregiver's skill with babies is to watch the manner in which she handles a nappy change. What a waste it is when caregivers grimly, silently, roughly, quickly change a nappy.

TOILETING

The importance of helping children learn to use the toilet on an individual basis rather than as a group exercise cannot be overstressed. An effort to help a child use the toilet should come as a result of seeing signs of readiness and interest from the child, and *not* from a pre-conceived notion about when children should be trained, or a longing by the caregivers for fewer nappies to change. Children vary greatly in the age at which they are ready. One of the most important indicators of readiness is that the child shows awareness and can communicate that he is about to urinate or have a bowel action. Showing an interest in a potty chair or toilet is not sufficient evidence. Young children show interest in cars, but adults do not take that to mean they are ready to learn to drive!

Certainly children can be taught to use a toilet early, but if the child is not ready, and if the experience is unpleasant for child and adult, the disadvantages outweigh the advantages. If adults wait until the child is ready, then toilet *training* as such is unnecessary, as children learn themselves with some assistance from adults. It is unfortunate that the term "toilet training" is so common, since it implies a process that is deliberate, structured, and directed by a "trainer".

One of the advantages of children being in a group situation is that they can learn so much through imitating other children. This applies to toileting routines too. Children may be more eager because they see other children using toilets, and they may be more willing to spend time on the toilet without an adult's attention if there are other children there also. However, group toileting should only occur spontaneously; it is not appropriate to have particular times in the day when everyone sits on toilets or potties.

Having a book or toy to entertain themselves with while sitting on the toilet enables children to sit longer. Child-sized toilets make it easier for the toddler to manage on his own, as does clothing that is easy to pull up and down.

The key to helping children develop successful toilet habits is to encourage them gently and quietly without focussing too much attention and let the child lead the way.

A decision to begin helping a child learn to use the toilet should be made not by caregivers but by parents and caregivers together, as should any major decision about a child's experience in child care.

REST AND SLEEP

Almost all children in full time child care need a rest or a relaxing time out during the day. Many will need and want to sleep. However, with children of any age, as with adults, there is great variability in the amount of sleep and rest needed and in the time when it is needed. For that reason, the aim for sleeping routines with children of any

age in a child care centre should be for the greatest degree of flexibility and individualization possible.

In a group of under two year olds there will be children going to sleep and getting up at different times during the day. Children who are light sleepers and those who are very noisy as they go to sleep and wake up may need a somewhat protected area to sleep. Given time, most children surprise adults with their ability to sleep with noise around them.

Flexibility also means that caregivers try to adjust the daily routine to meet special needs – for example, to allow the child whose mother said he went to bed very late last night and who is acting very sleepy to have a sleep in the morning, or to let the child whose face is almost falling into her food at lunch sleep before she eats.

As with all aspects of quality care, a good rest and sleep routine is responsive to the needs of children, rather than coming out of a previously established rigid plan. Children are encouraged to sleep, but those who will not or cannot are not pressured and are given books to look at. Children are allowed to get up as they are ready to.

Adults must help some children make the transition from busy active play or mealtime to quiet, relaxed, calm rest time. Tidying the room, drawing curtains or blinds and playing quiet music may help children to relax. Some children will find this adjustment harder to make than others. Caregivers can use the time as children lie down as a special time to talk individually to a child, rub a back, be with a child alone, show affection and caring. Caregivers should try to look relaxed themselves, lowering their voices, perhaps sitting and reading a book after children are settled. If sleep routines are unpleasant for children, they may learn to resist sleep and rest rather than seeing it as a natural welcomed part of the day's activities.

QUESTIONS AND SUGGESTIONS:

1. Why in our culture is so much emphasis placed on toilet training?
2. Discuss your own preferred sleep patterns with friends or other staff members – that is, how much sleep they need and when they prefer to have it. How well would you and they fit into a group routine?
3. What can be done to help children who do not fit into the usual sleep pattern in your centre?
4. What about the child who seems never to get enough sleep at home? What can you do to help him or her?

OTHER RELATED SHEETS:

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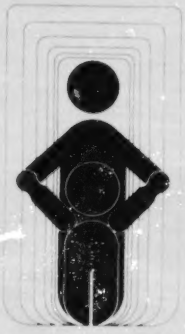

Overview of Discipline

Anne Willis Stonehouse

Discipline is the area of child care or child rearing where help and advice are requested most frequently. That should be comforting in that it reflects that few people are satisfied with the way they handle this aspect of children's behaviour. However, it also indicates that issues are complicated, and that there are no easy solutions or answers.

Discussions about discipline are often very animated and emotionally charged. They sometimes turn into arguments about human nature, whether people in general are mostly "good" or "bad", and what is needed to ensure "good" behaviour. Also, adults have very different ideas about ideal characteristics in a child. Some people, for example, value assertiveness, independence, individuality, a questioning attitude, while others see reticence, docility, ability to get along with others, willingness to take direction from others as more desirable attributes. These values, which some adults would express as aims in their child rearing, certainly influence the kind of discipline they use with their children. Again, this points to the fact that there are no simple answers when it comes to discipline.

Discipline is the teaching undertaken by an adult with a child about what is good to do, what is not good, what is safe, what pleases other people, what angers or hurts other people. Often adults see discipline only in a negative way – saying no, punishing, smacking, stopping. We are poor teachers if we only tell or show a child what *not* to do, and then, only *after* the deed is done. That is like teaching a child colours by showing her objects and telling her what colours the objects are not. For example, showing a child an apple and saying, "It isn't blue or brown or green or yellow or purple," is not a very effective way to help her learn red! Yet with discipline we do this with children – we ignore them or take it for granted sometimes when they cooperate, wait, share, take turns, play independently, or show self control. We respond, often very dramatically, when they displease or annoy us. We sometimes stop them physically, or with words, from doing things without telling them what they *can* do instead. We cheat them when we do not give them "the other side of the story". We should think of discipline as helping a child know *what to do,* instead of seeing it mainly as knowing what not to do.

Sometimes we re-direct or stop or reprimand a child without explaining why. Of course we cannot always give reasons, but if we seldom or never explain to a child why something is or is not allowed, how will the child ever be able to make some judgments himself about what he can and cannot do? As adults we have mostly forgotten all the things we did not know or understand at age two or three or four. For example, why is it okay to throw a ball outside but not inside? Why is it okay to fill the wading pool up with plastic toys but not okay to fill the toilet bowl? Why must a spoon be used for peas but not for bread? There are probably literally hundreds of other "facts" about the world that we as adults accept, but which may not be obvious to a young child.

Limits and orders given without explanation keep a child dependent on other people to know what to do. Most people, if asked about the aim of their work with children in the area of discipline, would say that they wanted to help children to be able eventually to guide their behaviour on their own. In other words, the aim is self-discipline, or behaviour based on control of self and understanding and appreciation of other people's needs, rights and feelings. Children who have not experienced discipline that teaches, who are not given explanations, have no basis for deciding about their behaviour. Children for whom the main kind of discipline is punishment – that is, if they do something wrong, an adult causes something unpleasant to happen to them – are also denied the chance to move towards self-discipline. They often develop a philosophy which says, "If you can get away with it, if nobody is looking, try it. If you think you'll get caught, don't do it". They have no basis for disciplining themselves.

Of course, it goes without saying that the way we explain things to young children depends on their age, and with very young children explanations must be brief and simple. However, children under three understand a lot more than they can say, and it is easy to underestimate their comprehension. Even if you are fairly sure the child will not understand an explanation, give a simple one anyway, just in case.

We sometimes make the job of disciplining a child harder for ourselves. It is easy to find yourself thinking that the best way to ensure that a child develops a characteristic or behaviour in the future is to demand it in the present. That is, some people will say that if a child is not made to share from babyhood, she will never be able to share. Similarly, some people worry that if children are not made to sit at the table until everyone is finished their meal from the time they are very young, they will never be able to. This is not true. Children's needs and behaviours change as they grow. Expectations,

and therefore what is labelled as misbehaviour, must change as a child grows. The best discipline is based on a commitment to meet the child's developmental needs as they are *now*.

There are no quick and easy gimmicks for disciplining a child. Teaching children to respect and care for other people, material objects, and themselves and to guide their behaviour accordingly is a long slow, sometimes frustrating process, and there are no shortcuts. The same explanations will have to be given over and over again as it takes a long time to learn these behaviours.

Interactions with children cannot always be carefully thought out beforehand. Sometimes reactions of adults to children are not even rational – they occur spontaneously and with strong feeling, and depend very much on the adult's mood and the situation, as well as the child's behaviour. In assessing reactions to a child's misbehaviour, over the long term, there are two questions the adult should ask:

1. Do I usually respond so that the child learns something, so that my reaction decreases the likelihood that this same thing will happen many more times?
2. Do I respond so that the child does not lose face – that is, so that he comes out of the situation without feeling stupid, embarrassed, bad about himself?

There are many ways of responding to a child's misbehaviour that may get rid of the undesired behaviour but which give the child a very negative picture of himself. Probably the single most important thing to aim for in working with a child is to give him a positive self concept, a picture of himself as a capable, competent person who can bring pleasure to others.

QUESTIONS AND SUGGESTIONS:

1. Write down characteristics that describe your idea of the ideal child at age four or five. Compare your ideal child with other people's.
2. Do you think it is a good thing for children to question adults, disagree, or argue with them? Why or why not?
3. How many times in the past few days have you praised a child for desirable behaviour, let her know in some way that you approve of what she is doing?
4. How old do children need to be before you can begin to explain things to them?
5. What is punishment? Should it be used when children misbehave? If so, what kinds are appropriate and how should they be used?

OTHER RELATED SHEETS:

15. Discipline and Babies
16. Discipline and Toddlers
17. "Aggressive" Toddlers
18. "Aggression": 3-5 Year Olds
19. Biting
20. Discipline Discussion Sheet

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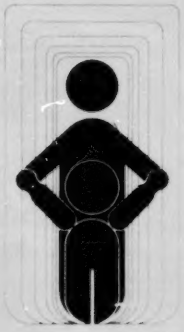

Discipline and Babies

Anne Willis Stonehouse

"How old should a child be before discipline starts?" is a question asked frequently by people who work with children. Discipline starts at birth, along with other teaching and learning. It begins, not with saying no, denying wants and needs, exposing children to unnecessary frustrations, or helping a baby see that life is not easy, but with exactly the opposite. Discipline begins with meeting a baby's needs, coming when she calls, helping her learn that other people are giving and kind. Some people worry that if we make life too easy for babies they will be spoiled. A secure start, being given to, having needs met quickly and sensitively nourishes a much later capacity in the child to give, to wait, to share. In other words, it ensures against what is commonly termed "the spoiled child".

What babies need when they start moving around and really "getting into things" are:

- a helpful adult who is ready to distract, guide, re-direct attention and interest, and remove temptation (babies do not have much will-power or self control)
- adults who give lots of attention when babies are happy, talkative, playful, as well as when they are crying
- someone who is on their side, who understands their drive to explore, who knows their limitations.

Babies do not need:

- smacking, for it is not effective and, more importantly, it teaches them to hit
- being yelled at
- someone who says no constantly, for big and little offences, and does not follow through and help the child stop
- retaliation, having done to them what they did to someone else — pulling hair, biting, for example
- labels, such as naughty, bully, aggressive, which will create a self-fulfilling prophesy, for children believe what we tell them about themselves.

From the very beginning and throughout the early years of a child's life, concern with setting limits and discipline must be balanced by an appreciation of the child's need to explore. As Willis and Ricciuti (1975) state:

> Too much emphasis on control, too many restrictions, will tend to discourage babies from exploring. An adult interacting with a baby should not be concerned primarily with hoping to produce "good" babies who do not get into things, but, rather, active, curious explorers who do get into things. (p. 85)

Discipline begins with gentleness, understanding, sensitivity, firmness. In fact, it stays that way, whatever the child's age.

SOLVING PROBLEMS IN DAY CARE *

In a child care program built on an understanding of babies' needs, most of the limit-setting and "no's" will have to do with babies' interactions with each other. The physical environment should be set up so that there are not excessive restrictions on the babies' activities because of safety hazards. A good general guideline for caregivers is that they try to minimise the number of situations that require them to say no or otherwise stop a baby from doing something. Some examples of ways of minimising the need for repeated prohibitions and restrictions follow.

A ten month old is obsessed with trying to climb into an adult size chair. He is eager but not very skilled. The caregiver is busy with two other babies and cannot help him. She takes the ten month old to another part of the room, gives him a toy that interests him and then removes the chair from the room.

An eight month old is playing with a toy that happens to be the current favourite of another baby, who cannot sit by and watch this. He crawls over to take it away. The caregiver, understanding that the situation could be very frustrating for both children, involves the second baby in a game with her.

A seven month old has picked up a cardboard egg carton. He immediately begins chewing it with great enthusiasm. The caregiver, instead of taking it out of his mouth repeatedly and encouraging him to play with it in other ways, takes it away and gives him a rubber toy to chew on.

The caregiver is setting up lunch in the room. An eleven month old begins fussing, pulls herself up to the table and tries to grab dishes and feeders. The caregiver puts her into a high chair and gives her some finger foods. She realizes that she should begin earlier to get ready to feed this baby; she cannot expect an alert eleven month old to be patient for such a long time after the baby has noticed that she has started preparing lunch.

Two babies are together on the floor. One reaches out over and over to pull the other's hair. The caregiver puts him in a playpen with some toys.

* The following material has been adapted from Chapter 6. "Helping Babies Adjust", in Willis, Anne and Ricciuti, Henry, *A Good Beginning for Babies*. Washington, D.C., National Association for the Education of Young Children, 1975.

The common element in all these situations is that the caregiver, sensitive to the babies' limitations, changed the situation according to the babies' needs to make it more tolerable for them, rather than expecting to change the babies' behaviour directly. Also, she did not expect the baby to cooperate with just verbal instructions.

Some behaviours which in older children may be cause for adult anger and annoyance, in babies are natural ways of exploring and being curious. When babies can move, they are interested in exploring each other. Sometimes the exploring is rough, painful or irritating to other babies. Caregivers should not base their reactions to this exploring on the assumption that babies intentionally hurt other babies. Similarly, it should be recognized that babies have no sense of property rights and no understanding of or willingness to share; therefore, they take things from one another. When babies do this and the "victim" does not seem to mind, it is probably best for the caregiver not to intervene. If one baby is protesting, or if it looks as though they may hurt each other, she may need to step in to settle the issue, hopefully by producing a duplicate toy or redirecting the attention of the "taker" to something else.

Automatically pulling a baby's hand back from another baby or removing the toy being vied for are not very helpful ways of reacting. Babies can learn to touch other babies gently if shown how over and over by a patient caregiver. Caregivers should not discourage babies' interest in each other but rather guide it along acceptable channels.

It is easy to misuse and generally over-use the word "no" so that it has no impact. "No" can become effective when used with an older baby if it is used sparingly and is accompanied by some helpful action – redirecting the baby or removing the object causing the problem.

Effective teaching of babies comes out of understanding normal development and knowing individual babies. Helping babies on the way to learning some controls is no different from helping them gain other kinds of skills.

QUESTIONS AND SUGGESTIONS:

1. Why is it that some babies seem to get into more "trouble" than others?
2. Do you think it is possible to make life too easy for a baby? If so, give some examples. What is the result?
3. When can young children begin to learn some limits?
4. What are the most common kinds of discipline situations that arise with the babies you care for?

Further questions and suggestions are contained in Sheet 20.

OTHER RELATED SHEETS:

14. Overview of Discipline
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OTHER REFERENCES:

Willis, A. and Ricciuti, H. *A Good Beginning for Babies.* Washington, D.C., National Association for the Education of Young Children, 1975. (Distributed by the Australian Early Childhood Association Inc.)

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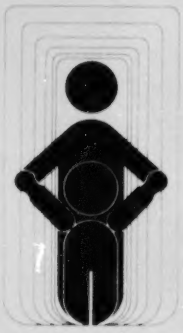

Discipline and Toddlers

Anne Willis Stonehouse

Note– This material has been adapted from the UNDERSTANDING YOUR CHILD series, Number 11: "Discipline", by Anne Willis, published by The Lady Gowrie Child Centre, Melbourne, in conjunction with the Australian Early Childhood Association Inc. (formerly the Australian Pre-School Association Inc.)

Young children have to learn many things as they grow. Learning to guide their behaviour – to stop, to wait, to check impulses – learning what pleases and displeases adults is one of the most challenging jobs of the one to three year old. Discipline is the help adults give to toddlers in this process. This positive view of discipline involves much more than punishment, as punishment implies a negative approach, doing something unpleasant to a child after he or she has done something undesirable.

The aim or goal of this process is a child with good feelings about herself, a child whose behaviour is motivated by understanding, sensitivity, and control inside herself, not by fear of outside consequences for doing something that is prohibited. Put simply, the aim of this positive approach to discipline is self-discipline.

Discipline involves setting limits, restricting and prohibiting, but it goes far beyond that. It incorporates teaching respect and caring for other people, reasons for limits, and especially for the very young child, helping to provide the controls or will-power which the child lacks.

The process of helping a child learn to control and guide his own behaviour is a long, slow, tedious one and can be discouraging, particularly with toddlers, whose need to assert themselves and be independent often interferes with cooperating and doing what is asked. There are no simple answers to questions about discipline, no foolproof list of techniques. There are, however, some principles or guidelines which may assist in helping one to three year olds guide their behaviour.

- *Begin with a sympathetic attitude to the toddler, an appreciation of the struggles and frustrations that are a significant part of the one to three year old's experience.* Toddlers have a way of involving adults in conflicts or power struggles where both parties are determined to win. Compromising, avoiding conflicts over insignificant matters is wise in relating to one to three year olds. All human beings, whatever their age, like to win, to be right, to have their own way. Rather than approaching a defiant toddler with the attitude of "I am the adult, I am older and wiser, and I am going to win", the adult should keep two questions in mind: first, how can I help the child to learn from this experience so that the likelihood of it occurring again is decreased; and second, how can I help the child "save face" – that is, get out of the situation without feeling stupid, ashamed, or embarrassed? The most important thing that adults can give a child to promote healthy development is a positive self concept, and methods of discipline used should build up rather than tear down good feelings in the child.
- *Avoid teaching, unintentionally, attitudes and behaviours that may create discipline problems.* For example, what are children learning when sweet foods with little nutritional value are given to them by adults as a reward for eating meats, fruits, and vegetables? Is the message to the child perhaps that sweets are better, more desirable, and therefore to be preferred? Similarly, what does it tell the child when being sent to or put in bed is used as a punishment for misbehaviour? Might that experience set up in the child's mind the idea that sleeping and resting are unpleasant experiences and something to fight and avoid? No wonder children resist sleeping! If being withdrawn from the group to be on one's own in order to get back in control is imposed on the toddler as a punishment rather than help, toddlers may resist this enjoyable and sometimes much-needed experience.

  Children learn through imitation. Children who are shouted at, treated harshly, smacked, not listened to will learn to treat others that way. Adults who live with young children should demonstrate in their own behaviour the kinds of behaviour they want to nourish in children.
- *Have age-appropriate expectations.* Sometimes adults create discipline situations by expecting too much of young children. Some examples of age-appropriate expectations are: toddlers cannot usually share or take into account other people's feelings, needs, and rights; most children under three do not sit still for very long; toddlers explore everything around them with their hands, and this includes other children.

  Toddlers may do dreadful things with good intentions – that is, because they do not know any better. An eighteen month old may smear his food or toss a cup of juice in his serious investigation of the world around him. That same behaviour would justify annoyance on the adult's part if done by a four year old. Similarly, a two and a half year old might offer a toy to a baby by flinging it at her. It is helpful to the child if the adult in this situation can both respond positively to the child's intention and help him learn better

ways of carrying out his good intentions.

- *Change the environment when possible instead of the behaviour.* Situations sometimes put excessive demands on the child. Instead of trying to alter the child's behaviour, try to eliminate the situation causing the problem. Several examples are: instead of trying to get toddlers to share toys, provide duplicates of favourite toys; instead of constantly telling a child to stop pulling records out of the cupboard, move them to a higher place; instead of constantly stopping two toddlers who are hurting each other, separate them.
- *Give choices in areas where the toddler is capable of making a decision, but only if the toddler's decision can be accepted.* Toddlers need to make decisions, and if they are given choices in some aspects of their experience, they are more likely to cooperate in areas where they cannot choose. Some examples of choices one to three year olds are capable of making are: wearing the red shirt or the green shirt, eating an apple or an orange, reading this book or that one. However, be certain that a choice is given only when it is intended. Do not say, for example, "Do you want to come inside for lunch?" if what is meant is "It is time to come inside".
- *Use actions and words to guide a child.* Verbal directives are not usually sufficient to guide a child under three; physical intervention is necessary. One of the most frustrating experiences with toddlers is when parents say "stop", "get down", "give it back", and they know perfectly well that the child understands the words, but the child continues doing the disallowed behaviour. In fact, sometimes a child verbalizes the prohibition or gives a clear indication that she understands that it is disapproved of. One can imagine a toddler turning dials on the television, all the while saying "no, no, no" to herself; or a toddler approaching the cat and looking back to see if Mummy is watching just before tugging on its tail. Understanding what one should do is different from being able to do it. Many adults standing over a bowl of peanuts can state that they have had enough but are unable to stop eating them! This is how the toddler is with much of his behaviour. Often the toddler knows that what he is doing is disapproved of, but he may not have the control to stop himself. The toddler at the television set needs more than someone to tell him to stop; he needs someone to help him physically to stop, and furthermore to help him find something else interesting to do to take his mind off the television.
- *Use "do's" instead of "don'ts".* Tell a child what he can do, not just what is not allowed. Often young children do not have the capacity to infer from adults' prohibitions what is acceptable. They need adults to take that step for them. "Stack the blocks" is more helpful than "Don't throw the blocks". "Feel the baby's hair gently" is better than "Don't pull hair".
- *Avoid letting undesirable behaviour be the best way of getting attention.* Certainly disapproved behaviour cannot be ignored, but it is critically important that desired behaviours – waiting, co-operating, showing signs of independence or self-control – are effective ways of getting adults' attention. Praise toddlers for these behaviours – tell them when their behaviour pleases, so that they can build up some understanding of what is desirable. "You waited very patiently", or "Thank you for giving her the toy", or "You're working very hard by yourself" are more helpful comments than "That's nice".
- *Have reasonable limits and help the child to follow them.* Toddlers need limits and the security they provide. Their memory is unreliable, so limits have to be repeated frequently. They need to be given explanations of limits so that they can make sense of them and eventually apply them.

The second and third years of life are a time of tremendous growth in all areas, but most importantly this is the period during which the toddler is establishing himself as a separate person, balancing needs for independence and dependence, struggling with freedom. This is often a difficult time for the toddler as well as those he lives with. He needs a patient, gentle guide who understands his limitations as well as respects his strengths.

QUESTIONS AND SUGGESTIONS:

1. What are some ways that adults can provide for toddlers the controls they lack?
2. Have you ever noticed children imitating words, behaviours, or mannerisms that you would prefer them not to have learned? Is there anything you can do about it?
3. Do you build in choices for toddlers in your program? Give some examples.

Further questions and suggestions are contained in Sheet 20.

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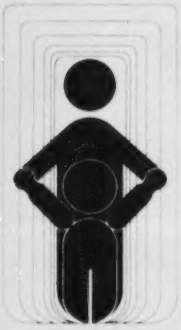

"Aggressive" Toddlers

Anne Willis Stonehouse

If caregivers are asked which children under their care cause them the most worry, are the most difficult and most challenging, many would name without hesitation children they label as aggressive. Hurtful, destructive behaviour is hard for adults to handle because it is disruptive, frightening, and sometimes dangerous. Also, strong negative feelings or emotions in other people generally make us uncomfortable. If caregivers are asked what they mean by aggression, they usually respond by saying "hurting someone" or "breaking things". In order for behaviour truly to be aggressive, however, two other conditions must be met: the act must be wilful and deliberate, intending to hurt; secondly, the actor must understand the impact of the actions. If these extra conditions are added to the definition, that leaves out most of the behaviour of toddlers. That is, if the two criteria are added, then *there is really no such thing as an aggressive toddler.*

EGOCENTRISM

Several characteristics of toddlers influence their interactions with other people. Under threes are egocentric – that is, they move through their daily activities mostly believing that the world revolves around them, that whatever they want they should have immediately. This developmental characteristic means that they go about their affairs largely disregarding that other people also have needs, rights and feelings. If they see a toy they take it, whether or not someone else is playing with it; if they want to go down the slide and someone is blocking their path, they simply try to remove that person; if they have an urge to hit someone to see the reaction it produces, they do it usually with little understanding of the impact of their actions. In other words, under threes cannot empathize, they cannot put themselves in another person's place, or feel how he or she feels.

Sometimes toddlers appear to understand feelings, by perhaps putting an arm around a child who is crying or offering a toy to a child. Usually, comforting behaviour by toddlers is thought to come from their imitating what they have seen adults do in similar situations. They are just as likely to look amused or disinterested in a similar situation. The "giving" or "offering" behaviour is not true sharing, as it is sometimes mislabelled, but rather is a kind of social game in which the child offers with the expectation that the object will be given back when it is wanted. He is just as likely to take back as to give. Toddlers give only when they feel like it or are made to, and that is not sharing.

So toddlers, when they hurt or offend each other, usually do not understand what they have done. This is a great social limitation, and one that adults try constantly to help toddlers get over by talking to them about the impact of their actions. How many times do caregivers say, "You can't do that – that hurts", or "Give it back; he had it first; you play with this"? A gentle but firm reaction to hurtful behaviour by under threes helps them to understand gradually the impact of their actions.

LACK OF UNDERSTANDING

Sometimes older babies and toddlers do hurtful things to other children when playing and exploring with no understanding that they are hurting. For example, one can imagine an eleven month old crawling over to explore another baby's toes. In so doing, she naturally puts them in her mouth. When she bites down the reaction is fantastic – the other baby startles, makes a very interesting expression, and an even more interesting noise. The baby, finding this reaction of great interest, intentionally repeats the biting to make it happen again!

GOOD INTENTIONS, BAD EXECUTION

At other times toddlers do terrible things with good intentions – that is, with the aim of "helping". One can imagine a two year old trying to offer a toy truck to a crying baby. Instead of placing it in the baby's hand, he drops it onto her, hurting her. One often sees toddlers trying to pick babies up and move them or play with them – good intentions, but the execution is often hurtful. Babies' and toddlers' first expressions of interest in each other usually involve getting hands on, and gentle touches can often become pokes or jabs or pulls. What toddlers need from adults in these situations is praise for the good intention as well as guidance in how to carry out the intention in a positive helpful way. It is not helpful to discourage interaction, for example, by always simply separating two toddlers who are pulling each other's hair. This will be necessary sometimes, but it is better when the caregiver can be with the children to help them enjoy each other.

LACK OF SELF-CONTROL

Another characteristic of under threes that may lead to their being mislabelled as aggressive is their lack of will-power or self-control. Even when they have an idea that something is disapproved of, they do not have the ability to keep themselves from doing it – they literally cannot stop themselves. The toy that another child is playing with may be so attractive that even though they know in some way that they should not take it, they may not be able to resist the temptation. Many of the acts that are labelled as aggressive are impulsive, are due to the

child's inability to inhibit or stop. Older children develop more self-control, but even adults have lapses of self-control, occasions when they know what they should do but cannot get themselves to do it. In summary, it is a normal part of development for under threes to snatch, push, bite, hit.

WHAT CAREGIVERS CAN DO

A caregiver may respond, "So what if it's normal and usually comes from egocentrism and lack of self-control, what do I do – let them hurt each other?" A caregiver's approach to toddlers hurting each other should begin with a sympathetic appreciation of their limitations. She should not expect them to share, play together, cooperate, and the program should be set up with this in mind. Toddlers need a large amount of space, so that they can get away from each other. Some may need time out from the group during the day. Having duplicates of favourite toys reduces the need to share. Caregiving with babies and toddlers is so demanding because the caregiver has to be in the midst of them, guiding, redirecting, distracting, offering alternatives.

It is appropriate to let under threes know when you disapprove strongly of something they have done, for example, biting or seriously hurting another child in some way. Let them know by your tone of voice and manner that you disapprove strongly, but reserve this reaction for things that really matter. Snatching a toy is not nearly as serious as biting, for example, and the caregiver should gauge her reaction accordingly. Remember, though, that hurting another child can be very frightening for the child who has done the hurting. He may need comforting as much as the victim. Finally, avoid labels such as bully, naughty, aggressive, as they only ensure that the child will develop those characteristics.

OTHER REASONS

There are numerous other reasons for children hurting other children, whether they are toddlers or older. Responding effectively must be based on some hunches about the likely cause of the behaviour. Some possible reasons are genuine anger and frustration, boredom, desire for attention, disruptive behaviour rewarded, imitation, tiredness, excitement, jealousy, social clumsiness, high activity level. These are discussed more fully in Sheet 18, "Aggression": 3-5 Year Olds'.

QUESTIONS AND SUGGESTIONS:

1. What are some specific things you can do with your program for toddlers to minimize needs for sharing and cooperating?
2. What can adults do to help toddlers become less egocentric?
3. How does the individual temperament of toddlers you care for affect their interactions with other children?

Further questions and suggestions are contained in Sheet 20.

OTHER RELATED SHEETS:

14. Overview of Discipline
15. Discipline and Babies
16. Discipline and Toddlers
18. "Aggression": 3-5 Year Olds
19. Biting
20. Discipline Discussion Sheet

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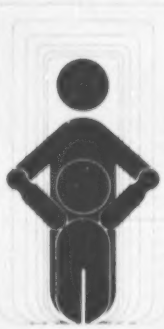

"Aggression": 3-5 Year Olds

Anne Willis Stonehouse

Many of the principles for dealing with under threes' behaviour that hurts others apply as well to three to five year olds. However, there are some differences in under threes and three to five year olds that affect adults' expectations and reactions to undesirable behaviour.

Over threes:

- know more, because of greater experience, than younger children about what are appropriate ways of behaving and about the impact of their actions on other children.
- have more self control or ability to wait, stop, and inhibit than do toddlers and babies.
- should be becoming fairly skilled at using language to communicate strong negative feelings.
- can understand language well, which means that adults can use verbal explanations and directions effectively with them.
- are less egocentric than younger children – that is, they are better able to share, cooperate, and generally take each others' feelings into account in their behaviour.

In spite of these differences, however, it is true of three to five year olds, as it is for under threes, that the label "aggressive" is misused and overused. Most three to five year olds, when they hurt other people or behave in a destructive way, do not fully understand the impact of what they have done. Often this kind of behaviour has other reasons behind it. Adults can often see solutions the child could have used other than the destructive behaviour, but sometimes the child cannot. Teaching children constructive ways of dealing with unpleasant situations and negative feelings is one of the most important roles of the caregiver.

SOME CAUSES

There are numerous reasons why children hurt other children, and responding effectively to these behaviours depends on having some idea about the likely cause. Some possible reasons are:

1. *Genuine anger and frustration.* Children sometimes are annoyed with themselves for not being able to meet others' expectations or for not being able to do something. Often they have very good reasons for being angry with other people – children or adults – who mistreat them, take things from them, threaten them, interrupt them, make fun of them, expect too much of them or compare them unfavourably with other children. Children who are disruptive while in care may be expressing anger and frustration stemming from the home situation or from the care situation.

   Physical conditions such as crowding or inadequate space to work can be frustrating to children. Activities that are either too hard or too easy can be very annoying. Children differ in patience and in their ability to stand frustration, and caregivers need to be aware of this.

2. *Boredom.* Some children hurt other children when they cannot find anything else interesting to do. In other words, they may get into difficulties with each other or do things that are not allowed simply because there are not other interesting activities to engage in.

3. *Desire for attention.* In understaffed child care centres, some children seem to figure out very quickly that the best, perhaps the only way to get the adults' attention is to be disruptive in some way. Some children seem to decide that negative attention, that is, being spoken to sternly and redirected to another activity, is better than no attention at all. Some children need much more attention than others from adults, and they will do whatever they need to in order to get it.

4. *Disruptive behaviour rewarded.* Sometimes negative behaviours become for a child a most effective way of getting what he wants. Adults sometimes let the child have her way to stop the behaviour. Children may give in to the disruptive child because they are frightened. Both of these responses encourage undesirable behaviour.

5. *Imitation.* Children will model their behaviour on what they have experienced or observed at home or elsewhere. Children learn many of their social skills through imitation.

6. *Tiredness.* Some children, when they are tired, are easily irritated, and this irritation may be expressed through annoying or hurting other children. Many caregivers report an increase in disruptive behaviour toward the end of the day.

7. *Excitement.* Surprising to some adults, some children lose control when they are very excited, very stimulated. It is as though they build up inside themselves a level of energy and excitement that they cannot contain, and it is expressed through biting or hitting out.

8. *Jealousy.* Hurting others may be an expression of jealousy toward another child; often the child is justified in having this feeling. The victim may or may not be the source of the

jealousy. For example, a child who is not pleased with a new baby brother or sister at home may show this by becoming disruptive with peers.

9. *Social clumsiness.* Sometimes children hurt or alienate another child when their intention is quite the opposite. Some children just do not have the social skills to initiate a social interaction, join a group, and so they do it in very clumsy unsuitable ways – hitting, shoving, snatching.

10. *High activity level.* Some very active energetic children cannot seem to channel their activity constructively. Their wild excited behaviour stems from just not being able to contain themselves.

WHAT CAREGIVERS CAN DO

Obviously, what a caregiver does to help a child who is being destructive comes from her idea of what is the main cause, based on her observations of the child and discussion with other caregivers and possibly the child's parents. The courses of action are much more obvious with some of the causes than with others. Sometimes what is called for is guidance from the adult, assistance through suggestions and participation in keeping play and interactions constructive. Some children need help in keeping on the "right track". If left on their own, their behaviour deteriorates and becomes silly and disruptive, simply because of their immaturity.

With a child who has a high activity level, the caregiver should provide constructive outlets for using energy. She can make specific suggestions to the active child about constructive imaginative play, such as mountain climbing or deep sea diving. She should try to think of things that will capture the child's interest and involve him in an active physical way.

For the socially clumsy child, she should help the child learn better ways of getting involved. She can do this by giving the child a role to play, a special way to contribute. For example, she can give her some small animals and say, "Let's take these over to those children in the block corner. They may want to build some houses for the animals". For the child who is trying to get attention, it is best if the caregiver can make a special effort to give attention at other times as well, preferably before the child seeks it in inappropriate ways, and at a time when the child is behaving appropriately. For the child who is bored, try to find something that will interest her, and help her to get involved.

There are no simple solutions for getting rid of undesirable behaviour but following are some general guidelines.

1. *Acknowledge and accept the child's feelings of anger, frustration, or jealousy, even when you think the reaction is completely out of proportion to the cause, or unjustified.* Often the child's feeling is legitimate. The feeling must be distinguished from what the child does about the feeling. It is the action that may or may not be acceptable.

   Talk about feelings and encourage the child to talk about them also. Let the child know, for example, that there is nothing wrong with feeling so angry at someone that you want to hit him; what is not acceptable is actually hitting. As the child becomes more capable of using words, help him to substitute words for actions, to express these feelings verbally.

   Helping children to become sensitive to their own angry feelings is an important first step. Ultimately a child should be capable of dealing constructively with these feelings – for example, knowing when he needs to be on his own and being able to do something about it.

2. *Provide a balance of quiet activities and vigorous, active ones throughout the day.* If a child is tired or excited and almost out of control, remove her from the situation or change the environment. Children often need help in calming down. They need someone to distract them, help them get involved in acceptable activities. If a caregiver removes a child from the group temporarily, it should not be done as a punishment, but rather to help. A story in the corner or a brief quiet time with the caregiver's arm around the child can stop some undesirable behaviour.

3. *Comfort the child who has hurt as well as the child who has been hurt.* Hurting another child can be very frightening. The child who hurts is likely to need as much attention as the victim. Ignoring the child who hurts is not usually helpful.

4. *Keep the disruptive child occupied.* Redirect him when you see that he is about to get into difficulty. Prevention is easier than fixing things up afterwards. If needed, give the disruptive child time and space to work on his own without interference, preferably on an activity he is especially interested in. Praise him for work well done.

5. *Decide what your priorities are and speak firmly and surely to the child about what is and is not allowed.* Sometimes the adult's own tone of confidence when she says, "I can't let you hit other children" stops a child from hitting. Set limits, repeat them to remind children of what they are.

REDUCING FRUSTRATIONS

Much undesirable behaviour in young children may be due to frustrations built into the child care situation. It is important for caregivers to recognize these frustrations, hopefully in order to do something about them, but if that is impossible, then at least to recognize that the child's behaviour has a legitimate basis. Following are some clues for caregivers on reducing frustrations for children.

1. *Provide adequate space to play and just to be alone.* If children are forced to be close to each other for long periods, they may become irritable, and irritability is contagious. Some children in child care need and want to be on their own more than others, and caregivers should try and arrange for this. It may be useful to try different arrangements of equipment to maximize open space. Creating a niche or cosy corner that is somewhat secluded through an arrangement of shelves, a place to retreat, may provide a much needed haven for some children.

   A second consideration is to be certain that activities and play materials are set up in spaces that are adequate for them. There is nothing more frustrating than trying to make a block construction in an area where people are constantly walking through, trying to make a drawing at a small table where other children's pieces of paper overlap on yours if they are to fit on the table, or trying to move creatively to music and having people constantly bumping into you.

2. *Ensure a wide range and sufficient number of play materials.* No precise formula relating numbers of play materials to numbers of children can be given. However, it is certain that it is very frustrating to children if there are not enough play materials.

   This means sufficient quantities of a single material, such as legoes, clay, or pots of paint for the numbers of children expected to participate. It is no doubt more satisfying to encourage a child to wait for a turn later than to have to take from everyone's allotment of clay so that each person has only a small portion.

   There also needs to be sufficient variety and quantity of different play materials so that children always have a choice. There certainly should be more things to do than there are children.

3. *Provide activities that are more challenging or less challenging, depending on the needs of particular children.* If you sense that a child's undesirable behaviour is caused by too many or too few challenges, it will be important to offer alternatives appropriate to the child's interests and developmental level. If a particular child's needs are somewhat different from the majority of the group members, the caregiver will need to help the child choose activities appropriate to his level. Saying "Why don't you try this puzzle?" and sitting with the child as he works is more likely to be effective than just setting out puzzles of varying complexity. It is also important to avoid making any comparisons between children's work.

4. *Reduce the noise level.* Some children may become disruptive when in a noisy excited setting. Several things that caregivers can do to alter the environment are:
   - Redirect play to quieter, calmer activities by offering suggestions and alternatives. A "wandering gang of boisterous explorers" could be encouraged to build a camp for themselves, for example. Offering some special props – gum nuts, cardboard, string, and other interesting "food" for example – to a group in the home corner who are being noisy can re-engage their interest and quieten them down.
   - Offer a story, some quiet music to listen to.
   - Lower your voice. Usually as the children's voices get louder, the adults' voices do too, in order to be heard. Talking very softly, even whispering, is often effective in capturing children's attention, and they must be quiet in order to hear.

5. *Keep children from distracting one another.* One of the jobs of the caregiver is to help children respect the concentration and work of other children. Setting up work areas out of the main flow of activity, encouraging children to face away from rather than toward other children when concentrating, providing sufficient work space are some ways of helping. With three to five year olds the caregiver can talk about the importance of work, the good feelings that come from working hard, and the importance of helping other children to work hard by not interrupting them.

6. *Minimise waiting time.* Try as much as is possible to avoid making a child wait with nothing to do. This can happen in play but happens most commonly in routines such as eating and toileting. Most children cannot tolerate "enforced idleness" very long, and their response is to become disruptive. Ensuring smooth transitions from one activity to another is a challenge for caregivers but certainly provides a better experience for children.

7. *Allow children freedom to choose activities.* Children need to make choices. If they are constantly told what to do they become frustrated and unhappy. Sometimes they can benefit from some direction by caregivers, but guidance is very different from orders. Programs for groups of children should allow individual freedom, balanced with helpful guidance.

Sometimes adults place great emphasis on getting children to apologize, to say they are sorry when they have hurt someone or been disruptive. This is pointless unless the child is genuinely sorry, which is unlikely.

In fact, if they are made to say it regularly, some children may get the idea they can do almost anything, as long as they say "I am sorry" afterwards! Giving children the words "I am sorry" to use is appropriate, however, if a child has accidentally interfered with or injured another.

It is easy to feel punitive or antagonistic to a child who hurts others, but this will not help the child; in fact, it will make the situation worse. In the long

run, the most important approach to a difficult disruptive child is one of alliance and sympathy.

QUESTIONS AND SUGGESTIONS:

1. One often hears that "the key to good discipline is consistency". What do you think that means? How important is consistency? Is there a place for compromising in setting limits, and is that the same thing as being inconsistent?
2. Discuss with other staff members the areas where your limits are firmest, that is, the most important "do's and don'ts". How do you enforce these limits?
3. How can you help young children deal constructively with angry feelings?
4. Are there some frustrations for children built into your program? Discuss these with other staff members. Can anything be done about them?
5. Talk over with other staff how you can arrange equipment and play materials to minimise children distracting one another.

Further questions and suggestions are contained in Sheet 20.

OTHER RELATED SHEETS:

11. Overview of Routines
12. Eating
15. Discipline and Babies
16. Discipline and Toddlers
17. "Aggressive" Toddlers
19. Biting
20. Discipline Discussion Sheet

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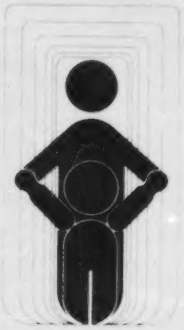

Biting

Anne Willis Stonehouse

Biting is the so-called "aggressive" behaviour that concerns caregivers and parents most. It is particularly hurtful to the victim, and unlike other ways of hurting – hitting, kicking, shoving, pinching – doing it intensively and effectively does not rely on physical strength and size. Unfortunately, almost every group of under three year olds has at least one biter. This makes the caregiver's difficult job even more challenging, for she has to think not only of how to help the biter and children who are bitten, but also has to deal with the concern and sometimes strong negative feelings of parents of children who have been bitten. These parents sometimes may feel angry toward both the biter and his or her parents.

The reasons for biting and ways of dealing with it will be somewhat different with under threes and over threes. Over threes usually have more understanding of how hurtful and disapproved of biting is, and they should be able to control their urges to bite. Over threes who bite regularly are probably expressing intense anger or disturbance.

The adult's surest, sternest reactions should be reserved for a few strongly disapproved of behaviours such as biting. Manner and tone of voice can convey to even a young child some indication of the severity of what he has done. Consistently disapproving reactions to biting are important. Adults should never respond in an amused, approving or even neutral way to biting.

Some causes and possible reactions to biting in babies and toddlers follow.

1. Teething may increase a baby's urge to bite. Babies tend to explore everything, both inanimate objects and people, with their mouths anyway. This need may increase when teeth are coming, since applying pressure on the gums through biting may be comforting. If this is the probable cause for biting, then offering the baby an object to bite, such as a teething toy, may help. Offering food, a piece of apple or carrot, for example, as an acceptable object to bite after the baby or toddler has bitten another person may be counter-productive, as it may in fact encourage biting as a way of getting something to eat!
2. Bites may happen impulsively, through lack of self control, almost just because there is someone there to bite. Many adults have had the experience of enjoying being the recipient of a very affectionate toddler's kisses and cuddles, and then at the moment when it is least expected, the toddler sinks her teeth into the adult's neck or cheek! Even though in this situation the biting is actually unintentional, it is still appropriate for the adult to show strong disapproval.
3. Babies and toddlers like to produce an effect, to make something happen, and some babies discover that biting accomplishes this. Biting another child is usually followed by a spectacular reaction. The very young child, who cannot understand how much it hurts the victim, finds the response interesting and rewarding, and may repeat it for that reason.
4. Excitement and overstimulation often create tension and excess energy which, unfortunately, some children "get out of their systems" through biting. This can be dealt with best by knowing who these children are in advance, and channelling their happiness and exuberance when it cannot be contained. This cause of biting often eludes caregivers, as the children appear, and actually are, happy before they bite. Time to calm down and get back in control, offered as a help and not a punishment, may be valuable in this situation.
5. Toddlers especially, but even older babies, experience a great deal of frustration, and they may express this through biting. Some people have noticed that there is often an upsurge in biting just before toddlers are able to communicate with words. Toddlers who have to spend much of their time crowded into small spaces with other toddlers may bite. Toddlers who are faced with too many challenges and pressures may bite. Toddlers whose play is interfered with constantly by other children may bite. Often biting can be reduced by altering the situation or the physical environment. Children who are not able to communicate well through language may express strong negative feelings through biting or other hurtful behaviour.

Making children say they are sorry seems a fairly meaningless exercise, especially for toddlers, who first of all probably do not understand the meaning of the words, and secondly, undoubtedly are *not* sorry. Biting children back confuses them, as the adult is doing the very thing that she is telling the child not to do.

Fortunately biting does pass, but that provides little consolation when there is a chronic biter in the group. Caregivers are often hesitant about talking to parents about their child's biting, and of course this must be done tactfully and supportively so that parents are not made to feel that they have failed or that their child is causing major problems. Caregivers may be surprised to find that parents may, in fact, be relieved if the caregiver brings up the problem, particularly if she discusses it as a manageable one

that occurs regularly with this age group. Parents may have some helpful information to contribute towards finding a way to deal with it. More importantly, any successful attempts to stop biting must be a concerted cooperative effort between parents and caregivers.

Biting can be very hurtful. With under threes, the intent is never as vicious as the effect. No magic solutions for getting rid of biting have been offered here. As was stated previously, biting a child as punishment for biting may discourage more biting at the moment, but in the long run it actually encourages biting, for children learn through imitation. Biting them back does not "teach them how it feels" – that lesson is far too advanced and sophisticated for a toddler. The most effective way to cope with biting is to be there to prevent it as much as possible, and to reduce frustrations.

QUESTIONS AND SUGGESTIONS:

1. Do you find that where you have one biter, often more emerge? If so, why do you think this happens?
2. How can you help children who bite because they are frustrated?
3. Is it difficult to stop yourself from feeling angry towards a child who bites? What can you do about this?

OTHER RELATED SHEETS:

14. Overview of Discipline
15. Discipline and Babies
16. Discipline and Toddlers
17. "Aggressive" Toddlers
18. "Aggression": 3-5 Year Olds
20. Discipline Discussion Sheet

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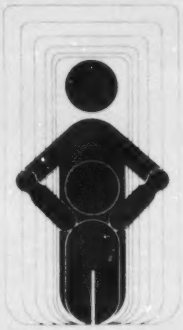


Discipline Discussion Sheet

Anne Willis Stonehouse

Note to person leading discussion:
This sheet is too long to be used all at once. It will probably be most useful if items are thought about a few at a time and discussed as there will certainly be different ideas about the best answers. Therefore you will need to take material from these sheets and re-organize it to meet your needs. *Obviously, it will be much easier to match behaviours with characteristics and guidelines if they are listed on separate pages.*

Discipline is just one of the many kinds of teaching that adults do with children. Discipline includes teaching children what pleases adults, how to avoid hurting themselves or other children, or damaging objects around them. It also teaches them about the consequences of their behaviour – how it affects people around them. Good discipline teaches without making children feel embarrassed, stupid, or bad about themselves.

Following are some behaviours seen often in one to three year olds. These are behaviours that may annoy or be undesirable, and therefore the adult may want to teach the child to change or not do them at all. Each of the behaviours is an example of a general characteristic of toddlers. Match each of the behaviours with the characteristic it illustrates (as presented on page _). Think of what you would do about the behaviour. Think about which of the guidelines your reaction illustrates. (You may want to set up a worksheet as the first item, biting, is set up here; that is, by listing under each behaviour the words characteristic, response, guidelines, and leaving a space to write the answers).

1. biting
   characteristic:

   response:

   guidelines:
2. kicking
3. hair pulling
4. sticking objects into power points
5. switching on the television, going into cupboards and drawers, touching things they should not touch
6. wanting things they see in the milk bar and supermarket
7. temper tantrums
8. refusing to clean their teeth or eat or do something else they need to do
9. snatching other children's toys
10. resisting going down for a rest or sleep
11. climbing onto high things
12. scribbling or painting on walls
13. not putting toys away
14. throwing food, being messy while eating
15. refusing to use the toilet
16. running into the road
17. demanding attention when the adult is obviously busy
18. showing anger
19. asking for an apple and pushing it away when it is offered

Characteristics of One to Three Year Olds

1. are egocentric, unable to consider other people's views, needs, rights and feelings
2. lack will-power or self control
3. need to assert themselves
4. are easily frustrated
5. are adventurous, eager to explore, experiment, find out, get hands on things
6. learn through imitating others
7. are limited by inability to communicate through language
8. lack understanding
9. want to make choices
10. are sometimes uncooperative

Guidelines for Discipline

1. Have expectations appropriate for the child's age.
2. Praise a child for good intentions, even when he carries out his intentions badly.
3. Sometimes change the environment to eliminate

the misbehaviour, rather than trying to change the child.

4. Give choices, but only when you are prepared to accept the child's decision.
5. Use actions and words to guide a child.
6. Have reasonable limits, and explain them briefly; sometimes children may not understand why what they have done is wrong.
7. Praise children for desirable behaviour; avoid letting undesirable behaviour be the best way of getting attention.
8. Tell a child what to do, not just what not to do; use "do's" instead of "don'ts".
9. Practise what you preach; remember, children learn through imitation.
10. Work with the child; be a helpful ally rather than an enemy when he misbehaves; help him do what he needs to but cannot.

QUESTIONS FOR DISCUSSION:

1(a) What are three examples of annoying, unsafe or destructive things that children do at age one, two, four, that are normal for the age?

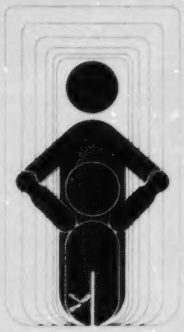
(b) What are some behaviours that you would accept in a two year old but that you would be annoyed if a four year old did?

2. Give three examples of a child doing something terrible with good or innocent intentions. What could you say to the child in these situations?
3. Discuss with other caregivers the reasons for and against putting out of reach objects that you don't want a very young child to touch.
4. Give three examples of appropriate choices to offer children at age one, age two, age four.
5. State three limits that you have in the group you work with. Why do those limits exist? Can you explain them in terms of children's safety or the protection of the physical environment? Do they interfere with children's needs to explore and learn? Are they reasonable limits?
6. How can you convert the following "don'ts" to "do's": "Don't throw the spade." "Don't hit" (when a three year old hits a child who has snatched her toy). "Don't run inside."
7. You can probably think of many things that adults are allowed to do and children are not. Give three examples. Are there good reasons for this? Do you think that adults sometimes overuse the excuse that "adults are different"?
8. Should adults admit their own mistakes or misjudgments to young children?
9. What about giving in or compromising with children?
10. Toddlers are sometimes very distractable. What do you think about distracting toddlers' attention as a discipline "technique"?

OTHER RELATED SHEETS:

14. Overview of Discipline
15. Discipline and Babies
16. Discipline and Toddlers
17. "Aggressive" Toddlers
18. "Aggression": 3-5 Year Olds
19. Biting

These notes have been prepared for people working in day care. Other sheets in the series are available from the **Lady Gowrie Child Centre, 36 Newry Street, Carlton North, Vic., 3054.**



What Do You Think About Babies and Toddlers?

Anne Willis
Stonehouse

Note for discussion leader:

The questions following are for use in beginning discussions about very young children in care. The items should be selected to allow discussion leaders to emphasise certain points about babies and toddlers. You may want to take from this longer questionnaire the eight or ten items that relate to points in the discussion.

Following the questions are special points that you may want to raise in relation to the "best" answers.

The following questions raise some issues in caring for under three year olds. The answers to some of the questions may seem fairly obvious, but if you discuss them in a group, you will probably find people choosing different answers. It is useful to discuss with other people some of the assumptions we have about children's development and needs. It will not be possible to cover all 15 items in one session.

Circle the best answer:

1. Babies begin to learn:
   a) as soon as they are able to talk
   b) when they are born
   c) around eight months, when they start crawling

2. One of the most important and exciting areas of development in the first year is:
   a) the baby's ability to speak words
   b) the use of the hands to explore and play with objects
   c) learning to see

3. In the area of using and understanding language, babies:
   a) understand what words mean about the time they can say them (around 18 months)
   b) understand language before they can speak
   c) begin to talk in a way that can be understood in the first six months of life

4. The most accurate statement about development is that:
   a) most important events happen at the same age and in the same order for all babies
   b) every baby develops different skills at very different ages and in a different order
   c) different babies do certain things at slightly different ages, but important developmental events usually occur in about the same order for most babies

5. Babies at birth:
   a) are all alike and will become different because of different experiences
   b) are born different and cannot be changed by experience
   c) are unique and will be influenced by what happens to them

6. If a baby passes through a stage when he or she is upset by strangers, this:
   a) is perfectly normal
   b) means that the baby has emotional problems
   c) is a sign that the baby is spoiled

7. In general, a very young baby will learn from and enjoy most looking at:
   a) other people, especially if they are talking or smiling
   b) a mobile of brightly coloured birds
   c) educational toys

8. Giving babies a lot of love and attention:
   a) will help them to become happy, healthy, trusting toddlers
   b) will spoil them
   c) doesn't make any difference

9. A good toy for an active eight month old is:
   a) a mobile hung high above her cot
   b) play dough
   c) a coffee can filled with small wooden blocks

10. The time to begin using books with young children is:
    a) when they begin to talk (around 18 months)
    b) as soon as the baby is interested and you feel comfortable doing it (perhaps as early as 4-6 months)
    c) as soon as they can identify the pictures in the books

11. The aim of sleeping routines in a program for babies should be:
    a) to be as flexible as possible
    b) to train them all to sleep at the same time
    c) to get them to go to sleep with as little help as possible from caregivers

12. Young children begin to influence adults' behaviour toward them:
    a) when they can move away from adults
    b) when they can talk
    c) when they are born

13. One of the best ways to help a baby learn to guide his behaviour is to:
    a) smack his hands when he touches something he shouldn't
    b) change the situation to get rid of what is causing the problem behaviour
    c) do nothing; children cannot really be disciplined until they are no longer babies

14. Babies and toddlers in child care:
    a) do not mind who cares for them if the person meets their needs
    b) should form special relationships of attachment with one or a few caregivers
    c) should not have only one caregiver or that will interfere with the mother-child relationship

15. Caregivers should see themselves as:
    a) sharing care with parents
    b) substituting for parents
    c) needing to do a better job than parents, since children are separated from them every day

Notes:

1. Some people still think that babies don't really begin to learn until they are talking and moving around, in spite of all kinds of evidence to the contrary. Discuss some of the kinds of learning babies are doing in the first few weeks and months of life. How do they learn?

2. While babies understand some language by the end of the first year and may use one or two words, it is not usually until the last half of the second year that there are great strides forward in their ability to speak. Babies can see from birth on, and by about four months they see as well as most adults. Beginning around three to four months, increasing skill in using hands to explore and play offers babies more and more chances to interact with the world in interesting ways.

3. Throughout the first three years of life, children's ability to understand language exceeds their ability to talk. By the first birthday, babies usually understand many words, though they may be able to say only a few.

4. In general, development is a fairly predictable process. For an individual child, however, the age at which a particular developmental milestone is reached varies from child to child. What is more predictable than specific times is the general order which development takes in the early years.

5. Anyone who knows babies knows that they are different from birth. You may want to discuss some of the ways that they differ. (See *Understanding Your Child* 10: "Individual Differences", published by The Lady Gowrie Child Centre Melbourne). Certainly they will be influenced by experiences, especially the way they are treated, after birth.

6. It may be inconvenient and sometimes even upsetting for babies to be distressed by the presence of strangers. However, this is a perfectly normal and predictable stage of development, usually happening first when a baby is between six and nine months. Discuss what this reaction to strange people might mean.

7. Babies like bright colours, patterns, movement, but mostly they like people. Watching people doing everyday (or not so everyday) activities is far more interesting and useful than watching mobiles.

8. Babies and toddlers who are termed "spoiled" are usually those who have not been given love and attention regularly. The best way to ensure that babies will be happy, healthy, trusting toddlers is to give them lots of love and attention. Discuss what spoiling is.

9. Babies like to get their hands on things. They also like to put things into their mouths. Play materials should allow for both these activities.

10. It is not possible to begin too early to use books with young children, as long as the adult adjusts the activity to the baby's interests. Even a very young baby will enjoy being held, looking at colours and patterns, hearing the adult talk.

11. Babies differ in the amount of sleep they need and in their preferred pattern of sleep. As much as possible, the rest and sleep routine in child care should take into account these individual differences (see Sheet 13: "Nappy Changing, Toileting, Rest and Sleep" in this series).

12. Babies begin "shaping" or influencing adults' behaviour as soon as they are born. If you doubt this watch what silly expressions, sounds, and movements adults will make to get a baby to smile! Discuss ways that babies affect adults' behaviour.

13. Babies are mostly incapable of controlling their behaviour. The best way to help them when they are doing something destructive, dangerous, or hurtful is to change the situation or remove them from it (see Sheets 14: "Overview of Discipline" and 15: "Discipline and Babies" in this series).

14. By the time babies are a few months old they can identify special people. It is most important that babies in child care have the opportunity to get to know their caregivers and develop special relationships. If caregivers work with parents and do not see themselves as competing with parents for the child's affection, then both the baby and the parent will benefit from a special relationship.

15. Caregivers must see themselves as sharing with parents, and must work with parents accordingly. Caregivers who see themselves as substitutes, or as better caregivers than the parents, are undoubtedly communicating this to parents, and this is not helpful to parents or to their relationship with their children (see Sheets 5: "Attitudes to Parents" and 6: "Relating to Parents Daily" in this series).

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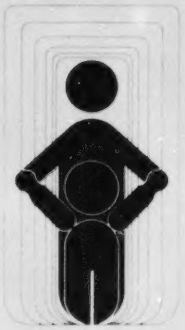

The Challenge of Toddlers

Anne Willis Stonehouse

Each age and stage of development throughout life carries with it special tasks to master. The "special job" of one to three year olds makes them challenging to live with and care for. The major developmental task of toddlers can be termed "person creating". Toddlers have to establish themselves as separate people who can make some decisions, live with some freedom, and exercise some control over other people. In other words, toddlers are learning to balance feelings of dependence and needing to be cared for, on the one hand, and the need to be independent or separate, on the other. Some toddlers move through this stage easily, while for others it is stormy, stressful, difficult. People around the toddler — parents, caregivers, and friends — usually experience this upheaval (if it happens that way) with almost as much intensity and unpleasantness as the toddler feels.

Toddlers are often described as uncooperative, defiant, aggressive, stubborn, strong willed. The behaviours that lead to these unpleasant labels usually come out of this struggle to be separate. Unfortunately for the people who live with them, toddlers need to assert themselves, be "bossy", change their minds, say no, refuse to cooperate, make unreasonable demands, defy limits, and generally be unreasonable. These are a normal part of development. The toddler delights in using newly mastered developmental skills such as talking, stacking blocks, climbing. Often the period before mastering them was taken up with weeks of trying, of working on new skills. The process is similar with establishing separateness and independence. The toddler must test and try out his power and freedom over and over to achieve it. Once achieved, he delights in using these new skills too.

An additional frustration for adults who are living or working with toddlers is that they are often uneven or unpredictable in their behaviour. Sometimes they seem amazingly mature, wise, cooperative, independent; at other times they are just the opposite, and they change quickly. The adult never knows from one minute to the next what sort of person she is dealing with. Also, this unevenness makes it easy to expect too much of the toddler. The adult finds herself saying things like, "I know he can sit through a meal. He did it yesterday", or "She knows better than to bite. She went through a whole day without biting anyone". This is the nature of one to three year olds, to be unpredictable, to change.

Toddlers have the knack of bringing adults down to their level, embroiling them in power struggles in which both parties are determined to win. The adult feels that, "After all, I am older and wiser than this two year old, therefore I *must* win." Often the issues are not very important ones, but the toddler can make the adult lose perspective. Toddlers have a way of making mountains out of molehills and causing the adult to see them as mountains too! Adults need to remember that everyone, even (or especially) a toddler, likes to win, to have his way. Sometimes, when an issue is not very important to you, or when the toddler persuades you through his insistence that it *is* important to him, give in, let him win. This is not the same thing as inconsistency; rather it is being persuaded. Sometimes, if a situation is growing out of proportion and developing into a big confrontation, the best strategy is to drop the matter temporarily until tempers and emotions have cooled.

There are several common ways in which "person creating" shows itself. These ways will be familiar to people who work with toddlers.

- One to three year olds may insist on doing things for themselves that they are really incapable of doing. They become frustrated when they cannot succeed but refuse any assistance from an adult. In the area of dressing, for example, a two year old may insist on putting on his shoes and socks, become increasingly annoyed and distressed as he tries and tries without success, but get very annoyed when a caregiver tries to help. The adult in this situation has difficulty knowing what is best to do, since everything she tries seems only to make the situation worse. Sometimes distracting the child's attention helps. Alternatively the child may allow the adult to help "just a little", to do something to assure the child of success.
- Toddlers need to find areas in their daily experience where they can be the boss. Many toddlers use routines — eating, sleeping and toileting — as occasions for self assertion, especially if they detect that the adult is in a hurry or is being very business-like. Three excellent ways to assert oneself at age two are to request a particular food and refuse to eat it — that is, ask for carrots and then push them aside when they are brought; soil or wet nappies after learning to use the toilet; resist resting or going to sleep or keep getting up after you have been put down for a rest. The sensitive adult, understanding the developmental needs of toddlers, must decide what her priorities are, which are areas where she is willing to compromise and where she will stand firm. In areas where there can be no compromise she must be gently firm without being confronting. As was

stated previously, sometimes the best solution is to drop the issue temporarily and come back to it when both adult and child are calmer.

- Competing for attention is a favourite way of toddlers to exercise power and control. They seem to be very perceptive about occasions when the adult's attention is totally occupied elsewhere. They then test to see if it is within their power to get the adult to pay attention to them. Usually they are successful, as they think of things to do that the adult cannot ignore – for example, climbing to the highest point in the room, hurting another child, or otherwise putting themselves, other people, or the physical environment in danger.
- Toddlers seem to have a fondness for saying no. Someone has suggested that one of the reasons they learn to say no so early and say it so frequently is that it is one of the words that is said to them most often! Sometimes toddlers get themselves into difficulty when their need to say no and not cooperate conflicts with something they actually want to do. This can be confusing and frustrating for the child and the adult. The adult may make a suggestion – "Let's go outside," or "Would you like to read a story?", for example. The toddler may want to do what has been suggested, but at the same time he needs to reject the idea simply because the adult, the authority figure, has suggested it. One can observe toddlers refusing to become involved in an activity suggested by an adult, but moving to it as soon as the adult has stopped trying to interest the child. It is almost as if the toddler is saying, "I don't want to give you the impression that I'm doing this because you suggested it".
- Temper tantrums are one of the most unpleasant behaviours that toddlers engage in. There are undoubtedly many reasons for temper tantrums, but sometimes they are a toddler's way of saying, "I cannot cope, I'm out of control. There are too many choices, too many pressures, too many decisions." Often temper tantrums happen when young children are tired or frustrated. Sometimes the toddler's struggle to be her own person gets the better of her. Temper tantrums require gentle, sympathetic firmness from the adult.
- One of the most visible signs of the toddler's experiments with freedom happens as a result of the ability to walk. Mobility allows the toddler to try out freedom and independence, moving away from adults, and separateness in a very literal way. Most toddlers enjoy a great deal the opportunity of moving away from adults, in a park or playyard or supermarket for example, looking back, being pursued, and sometimes (not always) returning voluntarily. This is for the toddler a very literal way of trying out separateness.

The one to three year old's developmental task of person creating makes him sometimes difficult to live with, but it also makes life difficult for him as well. Toddlers need to be given choices and freedom by the people who care for them. However, they need equally as much some limits for their behaviour and the security of knowing that these limits will be set by someone they trust. They need to know that when they lose control, cannot cooperate, cannot make a decision, that there is someone who will help them.

QUESTIONS AND SUGGESTIONS:

1. What are some examples of situations where it is appropriate to let the toddler win?
2. Is this struggle to establish independence or separateness something that happens once in a person's life or does it recur throughout life? If you think it does recur, when? In what way?
3. Name some situations that are likely to cause temper tantrums. Is there any way to prevent them from happening?
4. What is the best way to deal with temper tantrums?

OTHER RELATED SHEETS:

1. Good Child Care for Babies and Toddlers
12. Eating
13. Nappy Changing, Toileting, Rest and Sleep
14. Overview of Discipline
16. Discipline and Toddlers
17. "Aggressive" Toddlers
20. Discipline Discussion Sheet

OTHER RESOURCES:

Brazelton, T.B. *Toddlers and Parents.* Ringwood, Penguin Books, 1979.

Stonehouse, A.W. *Toddlers' Play.* Australian Early Childhood Resource Booklet. Published by the Australian Early Childhood Association Inc. (formerly the Australian Pre-School Association Inc.), 2nd printing September 1980.

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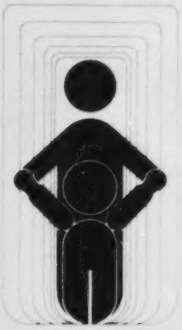

Attachment

Anne Willis Stonehouse

The development of a child's early relationships with adults is of great interest to people working in child care. Both caregivers and parents using care for their children wonder about the influence of early experience in child care, specifically on children's relationships with their parents. They worry that children in day care may lose the special attachment that they have with their parents.

First of all, what is meant by attachment relationships? Attachment relationships are similar whatever the ages of people involved, whether a one year old and an adult, two five year olds, or two adults. This means that to some extent you can apply understanding and feelings about attachment and relationships in your own experience to your consideration of attachment relationships in the children you work with. Attachment relationships are intense – they bring much pleasure and joy but also some unhappiness and distress. Consider your own experiences – it is probably true that the people you are attached to most strongly are at the same time the ones who can make you the happiest, the saddest, and the angriest. People who are attached like to be with each other, they do not like being separated, they often behave so as to please and get the attention and approval of the other person, and they think about and miss the other person when separated from them.

The importance of close relationships with a few people in a child's development has been well established through research and documented experience. Put simply, the fact is that children do not develop well without attachment relationships. Feelings of trust, a secure relationship with at least one adult, frees a baby to play and learn, and is the very foundation of development.

There is currently much incorrect information around on the subject of attachment, particularly the effects of child care experience on attachment, and many people are confused. People in the past have relied too heavily on information about attachment coming from studies of children in institutions who were undergoing long or indefinite separations from loved ones and who were not given the chance to become attached to anyone. It is incorrect to generalize from the effects of institutionalization to repeated short-term separations involved in child care.

Another factor that causes concern is that some theories of attachment stress the idea that if children are to develop normally, the first close relationship has to be with one person – usually the child's biological mother. Anything that disturbs or disrupts this relationship is viewed as detrimental to the child. More recent research and theories suggest that children can develop attachment relationships at a very early age to more than one caring person. The first attachment relationship that a baby forms, usually by the age of around six to eight months, is not always with the person who spends the most time with the baby or who meets the baby's physical needs. Relationships of attachment do not usually happen in a magical instantaneous way. As with adult relationships, more often they happen over a period of time as two people get to know one another.

HOW DOES IT HAPPEN?

What is necessary for an attachment relationship to form between a young child and an adult? Several factors are important:

1. Time together, the opportunity to get to know one another through mutual activities, play, social interaction and routines
2. Some degree of match or fitting together between characteristics of the child and the adult
3. The adult's sensitivity, the ability to meet needs effectively and consistently.

Attachment is a mutual relationship, with the child playing an active role, no matter how young he or she is. In other words, attachment is not something that happens *to* a child, but rather *with* a child. Babies are born interested in and ready to respond to people, and over the first several years of life they develop an increasing repertoire of social skills that "hook" adults. True social smiling, seen at around two to three months, is a major developmental milestone, as it allows a baby to express pleasure in a way that delights adults. By six months, babies are very active socially. They may show different reactions to strange and familiar people. By seven or eight months most babies have developed at least one true attachment relationship with all the characteristics mentioned previously. Of course mobility and being able to understand and use language increase tremendously the range of abilities a child can use in forming relationships.

DESCRIPTION OF BEHAVIOUR

What does a securely attached baby, toddler, or older child look like? As is true in any behaviour of young children, there are great individual differences in children's general ease in forming relationships, reacting to strange people and new situations, and apparent visible need for close relationships with adults. Children also seem to move in and out of stages of showing greater and lesser dependence on adults to whom they are attached. The particular situation also plays a major role in the child's reaction. Most children, whatever their age, will be less contented and happy if they are left with strange people or in unfamiliar surroundings than if they are left with people they know and in a place that is familiar.

A child who is secure in his or her attachment relationships may still show some distress at separating, especially under three year olds. The distress is usually mild if the child is left in a pleasant and familiar situation. Toddlers who have healthy attachment relationships show a balance of venturing away from adults, trying out independence and separateness, and enjoying closeness and contact. As they get older, in general they become more independent of adults; they turn increasingly to peers for approval and affection. Also, as they get older, children can understand more and remember better. More advanced intellectually than babies and toddlers, they have ways of "keeping in touch", maintaining feelings of closeness to people they are attached to even when separated physically from them.

An insecurely attached child is one who has experienced many

losses of special people, or who has had little opportunity to develop trusting relationships that last. This child typically will respond in one of several ways:

1. Being indiscriminately friendly and affectionate with any adult who acts approachable
2. Acting as though she does not need or want affection and attention from any adult
3. Being clingy, overly dependent for age
4. Protesting in an extreme way and becoming very upset at separation.

CHILD CARE

A stable child care experience of high quality, where relationships are a priority and separations are treated with sensitivity, allows a child several positive experiences. It lets the child build up confidence that parents will return and that it is possible to enjoy oneself when in the company of other caring adults. It can give a child the chance to form relationships with a few special people. It is most important that child care programs are staffed with this priority in mind. Constant changes in the adults caring for children undermine children's trust, make them feel insecure, and may make it difficult both to separate from familiar adults and to form attachment relationships.

More work in and attention to the effects of child care experience on relationships with parents is needed. Common sense and experience, however, would indicate that at least four factors may influence the effects:

1. The relationship that exists between parent and child when the child enters child care.
2. The parents' attitude towards separating. For example, do they want the child in care? Are they confident and secure about leaving the child with caregivers?
3. The quality of the child care experience for the child. For example, are there few caregivers totally? Does the child have the chance to get to know and to be known well by a few special people? Is the care personal and warm? Are needs and wants responded to quickly and sensitively? Is there continuity between care at home and in the centre? Do caregivers help parents and children separate from each other with a minimum of distress?
4. Caregivers' attitudes to and relationships with parents. For example, do caregivers do all that they can to nourish close relationships between parent and child? Do they talk with the child about the parents?

The importance of an open relationship of sharing between caregivers and parents cannot be overstressed. Involving parents in planning for the child, asking them for information, giving them the feeling that they belong at the centre or family day care home as much as the children do, showing them that caregivers think their child is special, having no intentions of trying to replace the parents as the object of the child's affections, in other words, *working with* them instead of *substituting for* them are ways that caregivers can nourish good relationships between parents and children. And that, in the long run, is probably the best thing that child care can do for families.

The other side of the picture, how caregivers can help children develop special relationships with them, is what caregiving of high quality is all about. When caregivers are friendly without being overwhelming, sensitive, and helpful children will become attached. In a centre where children are cared for by more than one caregiver, children may gravitate toward a particular caregiver, probably most often because of complementing styles or personalities. This is healthy, especially for very young children, as long as they do not become so attached that they cannot function without that caregiver present.

Issues around the areas of attachment are complex and require further serious consideration. Caregivers must learn to look critically at their own relationships with children and their parents to make certain that they are serving the best interests of children.

QUESTIONS AND SUGGESTIONS:

1. What are some ways that you help children develop relationships of attachment with the people who care for them?
2. Are there concerns or risks in children and caregivers becoming attached? Discuss these.
3. What are some ways that caregivers influence relationships between children and their parents?
4. Do some children seem more attached to a particular caregiver than to others? Why do you think this is so?

OTHER RELATED SHEETS:

1. Good Child Care for Babies and Toddlers
5. Attitudes to Parents
6. Relating to Parents Daily
7. When a Child is New
8. Arrivals and Departures

OTHER REFERENCES:

Gifford, J. "Is Day Care Really Risky?" *Australian Journal of Early Childhood*, Vol. 3, No. 3, September 1978, pp. 28-31.

Most textbooks on child development contain sections on attachment. Two books which the author found useful in preparing this sheet are:

Hetherington, E.M. and Parke, R.D. *Child Psychology*, Sydney, McGraw-Hill Book Company, 1975.

Mussen, P.H. et al. *Child Development and Personality*, London, Harper and Row, 1974.

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Children's Relationships With Children

Anne Willis Stonehouse

Babies are born with interest in other people. Older babies and toddlers are fascinated with other babies and toddlers. Yet this early interest is a far cry from the complex interactions and friendships that are observable in five year old children.

Learning to interact with and relate to other children is one of the most challenging tasks young children have. Relating to other people, which is what social behaviour is, involves both understanding of other people's feelings, needs and rights, and skills in communicating and interacting as well. These two aspects of relating are important because sometimes children (and adults, for that matter) may have good intentions and understanding but lack the skills to put them into action. In other words, some people are "socially clumsy". One of the obvious differences between the experience of a child reared at home and one who is in child care is that children in child care are spending much more time with other children. For these reasons, caregivers may wonder how they can best help children develop both the understanding and skills they need to relate to other people. Caregivers coping for long hours with groups of young children who are not very skilled socially may feel a certain amount of urgency about helping children learn to interact with each other.

Of course, expectations and the role of the adult depend very much on the child's age. Whatever the age of the child, however, the adult sets up situations where the child has (or does not have) opportunities to interact, and she provides limits or rules. In other words, the adult sets the stage for social relationships. The adult teaches social skills directly in a number of ways, through modelling, praising children, calling their attention to desirable behaviour, talking about relating, and assisting children directly, for example, by talking with them about acceptable solutions for conflicts. This latter sort of teaching – being there to explain, mediate, enforce limits, offer constructive solutions, is so important in child care. Left to their own devices, children will learn social skills, but not necessarily desirable ones. They may learn, for example, that the best way to get something they want is to snatch it or to intimidate, bribe, or threaten other children.

Following are some general guidelines for helping children at any age relate in a pleasurable and constructive way to each other.

Accept individual differences.

Differences in social styles, preferences, and even skills are accepted in adults. Yet sometimes caregivers and parents seem to have an image of the "well-socialized child" as the ideal to strive for. They see a well-socialized child as one who is outgoing, moves easily and confidently into new social situations, gets along well with other children, and who is liked and chosen as friend and playmate by other children. How many adults meet those criteria? Some children prefer to be by themselves, some children are leaders, others are followers, some children are very gregarious and outgoing. Unless the child is unhappy or is making other children unhappy, his or her unique social style should be nourished. The child who spends much time playing alone may be doing so by choice and that should be accepted. The child who plays alone because he is shy or lacks skills needs help from adults in learning to relate. Even babies and toddlers, who are not likely to be very skilled at interacting effectively with others, show individual styles of interacting and varying preferences for being near other children.

Be a good model.

There will be many occasions when you and a child you care for disagree, or where you are trying to get a child to do something. These are similar to situations that children may find themselves in when with other children. In your own interactions with young children who can understand, try to use discussion and compromise. Talk about problems in a reasonable way, rather than resort to use of authority, power, bribes, or physical force. In other words, model in your own behaviour the ways you want young children to interact with each other. Taking advantage of children's ability to learn through imitation and modelling is one of the most effective ways of teaching. The younger the child, the longer it will take for them to learn, of course. Even with babies and toddlers, where long explanations and discussions are inappropriate, brief explanations are helpful. The principle of using with children ways of interacting that you want them to use with each other still applies.

Set up the physical environment with social needs in mind.

The way the space is set up can encourage constructive social interactions. Giving children sufficient space so that they can be away from each other, so that closeness and being together happen by choice and not by necessity, increases the chances that their interactions will be pleasant. Areas where children can safely be alone for even a few minutes to work uninterrupted or just to have a quiet time out are needed by many children in group settings. Older children need protection from the disruption caused

by younger ones. Babies and toddlers need small groups and times when they are not competing with older children for attention.

Activities and materials that encourage communication and enjoyment of each other can be set up as appropriate. Two telephones, dishes, utensils, and saucepans on a table, cushions arranged together invite children to enjoy one another. However, caregivers must guard against offering an overabundance of materials that require cooperation, sharing, waiting, as these behaviours are difficult for preschool aged children. Duplicates of favourite toys or play materials decrease the need for sharing and waiting, and will make it more likely that interactions will be pleasant.

Have age-appropriate expectations.

Demanding social skills that are beyond children's capabilities may actually slow down the process of learning to relate, as children may then experience frustrations and unpleasant encounters. Under threes do not really play *with* other children much of the time, although they are very much interested in each other. They are more likely to play alone or along side each other. They have difficulty sharing, cooperating, waiting – in short, taking into account other people as they go about their business. Even three to five year olds will have difficulty learning to relate to other children.

Help children find acceptable solutions to conflicts.

Children are typically very intense, and their total involvement in a situation may keep them from seeing alternative solutions to conflicts. Sometimes their immaturity limits their finding solutions. The adult sometimes can step in very effectively to assist, to help children through discussion to sort out what the problem is and how it might be resolved. Young children have difficulty understanding the concept of fairness, who has what rights in a conflict, and often an adult perspective is needed.

With babies, the adult's role is to protect children from one another, to distract them when they are determined to explore each other in an active way that is not pleasant for the baby being explored. In short, the caregiver must be there in the midst of them to ensure that the encounters they have with each other will be pleasant. With toddlers (one to three year olds), the adult needs to do some of the same things she does with babies. However at the same time she takes advantage of their somewhat greater ability to understand by giving brief explanations, offering alternative or duplicate toys to children who are struggling over the same toy, demonstrating more positive ways of interacting when children punch and poke in exploring one another.

Teaching skills in social relationships should not be limited to intervening when children have conflicts or difficulties with each other. Supporting pleasant interactions and cooperative efforts, praising children, sometimes making suggestions and assisting when things are going well is just as important.

For children of any age, coping with the noise, the interference, the activity level, the "busyness" of a group for long periods of time is difficult, though at the same time being with other children can be pleasurable, even for babies. Caregivers need a great deal of patience and skill to help children learn to relate to other children.

QUESTIONS AND SUGGESTIONS:

1. Discuss individual differences among children you care for in their ability to relate to other children.
2. How can caregivers best help children who are "socially clumsy" – that is, who mean well but who lack skills in interacting with other children?
3. Do you agree or disagree with the assertion that we are more accepting of individual differences in adults than in young children? What are some reasons?
4. Think about your physical set-up and daily program. Are there aspects of it that interfere with pleasant social interactions between children? Can anything be done about these?

OTHER RELATED SHEETS:

1. Good Child Care for Babies and Toddlers
9. Daily Program
10. Family or Single-Age Grouping
15. Discipline and Babies
16. Discipline and Toddlers
17. "Aggressive" Toddlers
18. "Aggression": 3-5 Year Olds

OTHER RESOURCES:

Stonehouse, A.W. *Toddlers' Play.* Early Childhood Resource Booklet. Canberra, Australian Early Childhood Association Inc. (formerly Australian Pre-School Association). 2nd printing, September 1980.

These notes have been prepared for people working in day care. Other sheets in the series are available from the **Lady Gowrie Child Centre, 36 Newry Street, Carlton North, Vic., 3054.**

Things We Say About Children

Anne Willis Stonehouse

There are some statements about children that we all probably hear frequently. Sometimes we may even find ourselves using these statements because they are familiar and easy to call to mind. Just because they are common does not mean that they are untrue, but neither does it mean that they are true. It is a good idea to stop and think about them occasionally – that is, are they true, or do we say them because we hear them a lot? More importantly, do we accept these clichés uncritically and unthinkingly allow them to influence our interactions with children?

Before reading the items below, make your own list of common sayings about children. Discuss them with other people that you work with. Think of variations of these. The items below are presented for discussion to help you and people you work with examine some assumptions about children.

"Boys are just like that", and *"She's a typical little girl."*
When do people usually say these things – that is, what behaviours or activities on the part of boys and girls call up these comments? How do you think it effects children's behaviour when they hear these kinds of comments?

Often the comment about boys is made when they are active, adventurous, exploring or assertive with other children. For girls, the latter comment is made sometimes when they are being coy, keeping clean, imitating domestic activities in their play, or being quiet. Some people feel that in the past there have tended to be too many rigid ideas about what is typical behaviour for boys and girls and what are appropriate activities. The danger of these notions that we may have is that we communicate them to young children, even if we intend not to. Children tend to believe what we tell them, so by implying that boys and girls behave in very different ways, we create self-fulfilling prophecies.

The ways we influence young children can be very subtle. It may be interesting for you to look at the daily experience you offer to young children to see if there are "hidden" or obvious messages about appropriate behaviour and activities for different sexes. For example, do you have dress-up clothes for boys as well as girls? Are girls encouraged to play with blocks as much as boys? Are boys encouraged to participate in cooking, sewing and home corner activities? What messages are communicated in the books and stories you use? Think about limit setting. Do you have the same expectations for boys and girls, or do you perhaps tolerate more roughness, assertiveness, or generally boisterous behaviour in boys than in girls?

Discuss with other co-workers the following questions: Are boys and girls necessarily different from each other, or do we create differences by the ways we treat them? Are there some areas in the program we offer to young children that we could change to open up more possibilities for boys and girls?

"The important thing with children is to let them know who's the boss."
Children start at a very young age asserting themselves, testing the limits set by adults. This is a necessary part of their development. It is one of the ways that they find out what the rules are. Especially if children are with several different adults who set different rules and limits, they may need to test the rules more. What do adults usually mean when they use the term "show them who is boss"? Often this implies using heavy-handed power tactics or being very stern and authoritarian. Do you think that this is necessary in most situations? Might it be more helpful to a child to be firm and consistent but at the same time gentle and kind? Why do some people prefer the former style? Discuss some of the differences between firmness and bossiness.

"If you let them get away with it once, they'll want to do it all the time."
When do we say this? Is it sometimes in situations where we are considering bending or relaxing the rules? The following situations are possible examples:

- it is an especially hot day and the children want to take off shoes and socks and strip down to their underwear
- there is the sound of a fire engine approaching, and an interested three year old climbs up to stand on the table in front of the window to get a good look
- two children who have become good friends with each other want to rest on the same stretcher
- it is a beautiful sunny day, all the children are outside, one child who is especially fond of books is ill and needs to be kept quiet, and he wants to read books outside.

Discuss with people you work with what you would do in these situations. To what extent do you worry about the statement at the beginning of this section? Maybe there is a difference between bending the rules because of the situation or particular needs of a child and being inconsistent to the point that children do not know what the rules are and are constantly testing them.

"Wouldn't it be great to be a child again – to be carefree and have no worries."
People who do not know children tend to have the false impression that they are happy all the time, that they have nothing to worry about. People who work with young children learn very quickly that young children do have concerns, stresses, worries, sometimes not very different from the issues that concern adults. They are concerned about relationships, changes, new experiences, among other things. Sometimes adults do not take children's concerns seriously because *their* perspective tells them that the child is worried about something that is not very important.

Discuss whether or not you think that children are happier and more carefree than adults.

"Just leave them alone when they're fighting, they'll learn."
The relevant question, however, is "Learn what?" Certainly they will learn ways of coping with other children if left to their own devices, but because of immaturity and lack of experience, they may learn things that adults do not want them to learn. For example, young children in groups, if not given a lot of guidance and help from adults, may learn that physical force, bribing, threatening, snatching, intimidating are the best ways to get along with other children. If they are to learn constructive social skills, children need a lot of help from adults.

It is true though that adults do not always need to intervene in children's social interactions. Sometimes children can sort things out themselves more effectively on their own. How do you decide when to step in and when to leave children alone? Making this decision is one of the most difficult tasks of caregivers. Are there any guidelines to help us?

"Young children are just like little adults."
True or not true? Almost as frequently one hears people express the opposite view – that is, that children are completely different from adults. Both statements are partially true, in that in some ways children are very similar to, in some ways very different from, adults. Discuss some of these similarities and differences.

"Don't take any notice, she's just doing that for attention."
People say this sometimes as though attention is not a legitimate need. Children need attention from adults as much as they need rest and food. Sometimes, of course, they want more than the adult can give, and then she may have to say no, ignore, or distract their attention. Children who show off and do unacceptable things to get adults to take notice of them need to learn that there are other better ways to get praise, approval, and attention. So the solution is not to ignore children's bids for attention, but rather to give them attention when they are behaving appropriately.

A related statement often heard is, *"Don't pick up a baby who's crying or you'll spoil him."* What other way does a baby have of letting adults know that he needs something? Spoiled babies are usually ones whose needs, including needs for attention, have not been responded to consistently. For example, if a baby is picked up only after she has cried for a long time, she is learning to cry for what she wants. Furthermore, she is not having the chance to learn that there are other ways to get attention, such as smiling, looking, vocalising.

Discuss under what circumstances you might decide to ignore a child who is trying to get attention. At what age can you begin to help young children distinguish between acceptable and unacceptable ways of getting attention?

"Some children are just naturally aggressive."
Labels are applied too easily and too casually to young children, and unfortunately they tend to stick. "Aggressive" is one of the most commonly overused and misused labels. Children may be active, impulsive or clumsy, and this may lead them to hurt other children, but very few young children are truly aggressive. People who care for young children must try to avoid using the term "aggressive", and to describe instead what the child is actually doing.

What other common statements can you think of? What about:

"The best way to cure biting is to bite them back."

"Experience is the best teacher – the only way to learn what 'hot' means is to get burned."

"TV must be good for children. They love it."

"Children who are feeling angry and aggressive just need an outlet for their energy. Let them run around or give them a punching bag."

Discuss the extent to which these are true.

OTHER RELATED SHEETS

14. Overview of Discipline
15. Discipline and Babies
16. Discipline and Toddlers
17. "Aggressive" Toddlers
18. "Aggression": 3-5 Year Olds
19. Biting
20. Discipline Discussion Sheet

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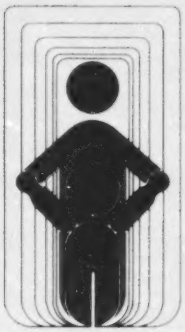

Relationships in Family Day Care

Faye McKay

Interest in family day care is growing. It offers some special qualities often not present in other day care settings and probably because of this many parents today are considering and selecting this type of care for their children.

Perhaps most importantly, family day care is likely to resemble the child's own home more closely than most group care environments because it caters for children in private homes, the groups are small and usually cover a range of ages.

Co-ordinators employed by councils which sponsor family day care programs * play a major role in the selection of suitable homes for the children needing care. As far as possible and in collaboration with the parents, the co-ordinator 'matches' each child with a family selected on the basis of his background and needs.

One carer has responsibility for her 'family', ensuring greater continuity in child managment and a fuller overall knowledge of each child's day. Instead of a range of caregivers, the child has only one carer to learn about.

While these qualities may give family day care certain advantages, there can be some disadvantages too. The very fact that the carer has responsibility throughout the day can result in fatigue or tension for her. Unless all the children sleep at the same time there may be no lunch break – she is 'on call' right through the day and she hasn't the companionship of colleagues in her day to day work situation.

With the support of an understanding co-ordinator and co-operative parents, family day care can work well. It is a sharing situation – a sharing of the joy and excitement of young children growing, as well as the sharing of frustrations and difficulties that are inevitably involved.

Let's look at some of the issues which can affect parents and carers and the children whom they share.

* In Australia, family day care is usually administered by municipal councils. In most cases, the co-ordinators employed by the councils are professionals experienced in matters related to early child development and social welfare. For information regarding family day care programs, contact local councils.

SETTLING IN

Separation difficulties occur in most day care situations and the settling in period can be difficult not only for the child, but also for the parent and the carer. The needs of all three should be considered.

While the co-ordinator facilitates the initial meetings and takes responsibility for outlining the procedure, the following points may help during the settling in period.

The child

Before the first parting takes place, it is important for the child to become familiar with his new surroundings and the person who will act as carer. Familiarity is closely related to feelings of security and trust. A gradual introduction could take place in the following way –

a. carer visits the child and parent at their home
b. parent and child make several short visits to carer's home
c. parent stays for first short 'sessions' with the child
d. parent stays away for only short periods at first
e. child may like to take a well-loved item from home.

Parents should always tell their child when they are leaving and when they will be back; sneaking off when a child is absorbed in something can destroy trust and increase anxiety. Even young babies can be helped to realise when the parent is leaving, by watching with the carer or waving goodbye, but care should be taken not to prolong this procedure.

The parents

Parents need to feel comfortable about leaving their child – this may be their first parting and it could be a very emotional experience for them. If the parents can get to know the carer before leaving their child, confidence and trust may be established early and form the basis of a good relationship.

Except in the case of emergency care, parents should allow time for the gradual entry outlined above. This gives them time to adjust to a new situation and learn something about the carer and the other children.

If the parents are happy about the new environment they have chosen for their child, they can then talk positively and with enthusiasm about the home, the carer and the other children.

If it happens that they feel at all unhappy about their choice, they can discuss their doubts with the co-ordinator and perhaps through her find another, more compatible home. Not all homes suit all children and it's important that parents are helped to find one which they feel is right for their particular child.

Parents should try not to feel upset if their child accepts the new environment readily, but consider it an indication of his security, independence and ability to adjust to a new situation.

The carer

When a carer is left with an upset child the time she can give to other children is limited. Gradual entry can have several positive benefits for her –

a. she can get to know the child before he is left in her care
b. it can give her the opportunity to demonstrate her caring skills, which reinforces her relationship with the parent
c. over the long term, she will have a more settled, trusting child in her care.

Some points to remember with the initial separation –

- *Unless it's an emergency situation, plan ahead to allow plenty of time for the child to settle in at his own pace.*
- *Don't anticipate trouble – some children settle into a new and interesting situation quickly.*
- *Even with gradual entry, some children still have trouble with the actual parting – how long the process takes is very individual. Try to be patient – it's well worthwhile in the long run.*

ATTACHMENT

There has been a great deal of research on attachment and there are varying ideas on how and when a child becomes 'attached'.

It has been found that by trusting and feeling secure with a small group of people early in life, children can usually make satisfying relationships later on.

Children can become equally 'attached' to their mothers and their fathers. They can also form strong ties with siblings and caregivers. This doesn't mean they love their parents any less but that their circle has widened to include others.

For any type of child care to work well, it's necessary for children to form an attachment with their caregivers. Family day care offers an excellent opportunity for the child to become 'attached' to one carer rather than two or more, as in most day care situations, where shift work of staff tends to break the continuity of care.

Occasionally a very young child may refer to his carer as 'Mummy' and this, understandably, can be very distressing for the real mother. At times, if hurt or upset, a child may want his own mother, no matter how loving the carer is.

These situations need to be handledwith great diplomacy, understanding and sensitivity if good relationships are to be maintained.

HONESTY

For any relationship to work well there needs to be a feeling of trust based on honesty. This is of paramount importance when the relationships involve children who, from a very early age, are so quick to sense the quality of the feelings between the adults in their lives.

If a carer is annoyed by a parent who is late picking up a child, it clears the air to talk about it and explain why it's inconvenient. There may be a very good reason why the parent was late, and talking through problems often strengthens a relationship.

Parents sometimes may not agree with the way an incident was handled. Discuss it together, apologise if mistakes were made – sometimes incidents can be misinterpreted.

Occasionally when parents come to pick up children they may notice signs of some upset during the day – their child may be over-tired or tear stained. There may be faint teeth marks on an arm not noticed till bath time. Talk about the problem as soon as possible with the carer, not the next door neighbour. Try to work through problems together.

Carers, too, need to be honest with the children they are sharing; deception is a sure way of breaking down trust and respect.

Don't pretend that the parents are in the next room or have only gone for a few moments if in fact they will be gone all day. Don't say "Mummy will be here in a moment" to an upset child if it's not true.

Points to remember –

- *Children are quick to react to tension and a situation which may have a simple explanation can quickly build up into a major crisis unnecessarily.*
- *Children often understand a great deal more than we think they do, and they cope better if they understand what is happening.*

RESPONSIBILITY

When sharing a caring role, certain responsibilities should be undertaken to ensure a degree of consistency in the child's life.

Carers should take responsibility for –

1. encouraging parents to ask questions about the ways they work with children, such as the limits they set, the type of discipline they use and the expectations they have for individual children
2. telling parents anything that happened during the day which may have influenced the child's behaviour
3. trying to care for the child in a similar way to the parents, thus providing some continuity in

the child's life, for example, type of food, sleep and toilet routines

4. being a good model with enough sensitivity so that parents don't feel inept in their own child-rearing practices. The super-confident caregiver may lessen the parent's own confidence. It doesn't hurt to let parents know that caring for children can, at times, be difficult
5. respecting ideas which may differ from their own, for example, cultural differences
6. clearly defining, without being dogmatic, their expectations of the parents, for example, gradual entry, suitable clothing for the children, procedure with sick children.

It should be the parent's responsibility, as far as possible, to

1. see their child arrives at the home clean, fed, unhurried and in good health
2. telephone the carer if the usual routine varies, such as being late to pick up the child
3. let the carer know if their child is unhappy for some reason, such as an upset at home, or a missed breakfast
4. not be disapproving of the carer in the child's presence, by either manner or word.

EXCHANGING INFORMATION

Parents and carers need to exchange certain information about the child's day. Sometimes this is negative. For example, the parent may say "Sally wouldn't eat her breakfast this morning", or "John seems tired today – we had rather a late night and he just wouldn't settle when we got home". The carer may tell the parent "Greg soiled three nappies this afternoon", or, explaining teeth marks, "One of the other children bit Sue when she grabbed his tip-truck".

For the child's well-being, we need to share this information – but we should also share some of the positive incidents. The carer may tell the mother, "Gary wanted to draw a picture for you this afternoon – I'm sorry we didn't have time", or the mother may say of a 'picky' eater, "Kelly ate all her vegetables last night and also finished her sweets".

Sharing positive information is not only good reinforcement for a child who may usually be uncooperative, but equally important for the quiet, co-operative, non-disruptive child who can be overlooked or taken for granted.

FEELINGS OF GUILT

Guilt is an unproductive emotion which is difficult to cope with, but many parents feel guilty when they leave their children in the care of others. To be relieved of their feelings of guilt, parents need to be confident about the carer who will take over their job for part of the day.

Carers should be accepting of the parent's need for help, whether it's for financial or personal reasons, and remain non-judgemental even if they consider the reasons invalid.

Sometimes carers may suffer feelings of guilt too – they may receive the first smile, feel the first real hug, hear the first words or see the first steps taken.

It is disappointing for parents to know they have missed these important 'firsts', but if carers can refrain from commenting and allow the parents to discover the new development themselves, they are indeed sharing unselfishly the excitement of young children growing.

PARENTS, CARERS AND CHILDREN GROWING TOGETHER

If parents and carers show an interest in each other, positive feelings are reinforced. Carers can encourage parents to come into their home, have coffee and spend some time in a warm, welcoming atmosphere.

Parents can collect waste materials for the children to use – boxes, scraps of materials, plastic bottles. They can take an interest in the day's activities and comment on the things they notice, like the good smell of something cooking or the first daffodil in the carer's garden.

If a warm relationship flourishes between parents and carers, these feelings can flow over to the children and reinforce their sense of security.

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